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The representation of nurses in American, British and Italian feature films

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**THE REPRESENTATION OF NURSES
IN AMERICAN, BRITISH AND ITALIAN FEATURE FILMS.**

Elisabetta Babini

Ph.D. in Film Studies

This thesis has benefited from the financial support of the Wellcome Trust grant as part of a strategic award in medical humanities to establish the Centre for the Humanities and Health at King's College, London. It forms part of the nursing strand of a programme of work in *The Boundaries of Illness*.

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ABSTRACT

The female nurse's image has been associated historically with a range of diverse and often contradictory values in popular imagery. Evidence of this is amplified in film. This thesis examines the representation of nurses in a corpus of over 250 feature films, from silent to contemporary cinema. Its foundational question is interrogating why these professional women have come to embody such varied and contrasting modes of femininity, to such an extent that they have become a particularly rich case study for the study of female stereotypes – and, accordingly, for the representation of gender, class and race issues. Building on existing scholarly work on the topic – especially that of Beatrice and Philip Kalisch, Julia Hallam and David Stanley – my study concentrates on (North) American, British and Italian cinemas, and focuses on the cinematic genres which have offered the most prolific depictions of nurses: biopics, melodrama, the thriller and comedy – and on how the prevalence of these genres has changed over time. Film Studies and Nursing mark its interdisciplinary nature; feminist film theory informs the textual analysis, and cultural and gender studies underpin areas in my comparative analysis. Besides expanding knowledge and the corpus of studies on its specific subject, the thesis makes a contribution to the medical humanities. The cross-cultural character of my research adds the Italian context, and expands the current scholarly debate on the representation of nurses to the influence that different national contexts have exerted on the depiction of these professional women as characters in feature films.

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ACKNOWLEDGEMENTS

It would not have been possible to write this thesis without the guidance and help of many people. First, I would like to thank the Wellcome Trust for its financial support. I am exceptionally grateful to my supervisors, Professor Ginette Vincendeau and Professor Anne Marie Rafferty. I would not have been able to complete this thesis without their illuminating advice, constant encouragement and endless patience. I also wish to thank Professor Brian Hurwitz, for his interdisciplinary counsel and kindness. I am very thankful to my colleagues, in particular Dr Louis Bayman, Dr Silvia Camporesi, Dr Rosemary Wall, and Dr Maria Vaccarella. My gratitude also goes to my fellow companions at Cambridge University: Dr Elisabetta Spigone, Dr Alessandro Rossi and Dr Carlo Sias, who encouraged me to apply for this doctoral grant. I wish to thank Duygu and Carla, my flat-mates, for their immense patience; and my dear and exemplary friend Mila. More than ever, I am grateful to my family, for their continuous support. This thesis is dedicated to “The Babinis”.

INTRODUCTION

My thesis examines the representation of female nurses in feature films (while I recognise there are male nurses in real life and, occasionally, on screen, the vast majority of cinematic nurses are female – just as the vast majority of their patients are male, as will be discussed where relevant). An iconic figure in popular culture, embodying often contrasting and contradictory modes of femininity, the nurse appealed to me as a particularly rich female figure to study in terms of race, class and gender issues. I am interested in exploring the different ways in which film engages with nurses (as important characters in the fiction) – the roles they play in the narratives, the facets of their professional, emotional, or sexual characteristics that are foregrounded rather than others; the ideological ends to which they are put at different times, in different genres and in different countries.

Except for the notable work of Beatrice and Philip Kalisch (1982, 1987) and Julia Hallam (2000), scholars have paid slight attention to nurses' screen depiction to date. My study aims at expanding these existing studies, using textual analysis as the main vehicle, and through theoretical frameworks that I detail below. I shall do so by examining nurses' cinematic portrayals that, in large part, still appear as underexplored, belonging either to neglected cinematic genres or national cinemas, or to films that are excluded from the works mentioned above, including some examples from the last decade.

My investigation focuses on (North) American, British and Italian cinemas. The reasons for this combine history, culture and generic categories. My thesis's subject matter has made Britain, first of all, a compelling reference point as "the mother of modern nursing", Florence Nightingale, and other famous and

historically important nurses, like Edith Cavell, were British, and – in Nightingale’s case especially – contributed to the development of nursing both in the country and, as models, abroad. Nightingale has been invoked as the source of a set of universal and defining values for nursing worldwide, and remains the profession’s dominant icon, even for cultures remote from Britain, such as Japan (*See* Takahashi 2004).

The US, my second national focus, not only drew from Nightingale’s tradition historically, through the importation of leading figures she had trained (e.g. Alice Fisher at the Philadelphia General Hospital) to begin its own training traditions, but reinterpreted that tradition in the context of its own cultures of practice and training trajectories (*See* D’Antonio 2010). The second major reason for my US focus is its film industry’s powerful, influential and internationally widespread reach. Given the above, America and Britain are also, unsurprisingly, the major western producers of films about nurses (Stanley 2008). A further comparative advantage in focusing on the Anglo-American axis is that nurses’ cinematic portrayals not only provide a lens literally into the representational politics of these professional women and the relative shifts in the profession’s positions in terms of global influence and leadership (*See* Rafferty 1995); they also highlight how such female roles and images are in turn shaped by broader cultural trends in the representation of race, class and gender.

While Hollywood and British cinemas’ centrality to a study of nurses’ representation is thus unquestionable, it is also the case that studies of screen nurses have hitherto been mainly limited to these two film industries. Thus, it seemed equally important to widen the scope of my study by incorporating a third

national cinema, to both expand the field and provide illuminating points of comparison. Given my familiarity with the Italian language, culture and cinema, Italy seemed an obvious choice. In fact, the Italian case turned out to be a particularly rich terrain for my study, for several reasons.

As chapter two sets out, the nursing profession in Italy has been subject to relative neglect, both in terms of scholarly research in the history of nursing and the role of nurses within Italian film in particular. (Pascucci & Tavormina 2012). Between the late 19th and early 20th centuries, the Italian case drew the attention of some British and American nurses (e.g. Amy Turton, Dorothy Snell, Helen Ruth Hamilton and Lavinia Dock) who attempted to export their “nursing model” to the country, judging Italian nursing as “one of the most puzzling and complicated problems imaginable” (Dock 1904: 354). On the other hand, and unlike in Britain and America, the influence of the Catholic Church on Italian society and, for our purpose, on women’s lives, work and healthcare matters, has been consistently and strongly in evidence. Given that nursing in the Anglo-American world was largely secular in nature, the cinematic treatment of nurses also reflects this religion-inflected difference, thereby providing a crucial starting point for a comparative and cross-national discussion.

Beyond social reality, Catholicism as the dominant ideology that has “controlled life – especially women’s lives – in Italy for many centuries and probably more effectively than in other European countries” (Cottino-Jones 2010: 3) has exerted an impact on Italy’s filmic representations. As I will discuss at various points throughout this thesis, one of the leitmotifs in the cinematic treatment of professional women is their tendency to be sexualised in the three

national cinemas. However, the fact that religion pervades most film plots either explicitly or implicitly in Italy has made its working woman/sexual icon axis, with regard to nurses, more extreme, complex and contradictory than in America and Britain. One of my case studies, the melodrama *Anna* (1951), provides an exemplary expression of how the religion/sex dichotomy marks out Italy's treatment of screen nurses as different (and, in particular, more sexualised) than (most of) their British and US counterparts where class and the dichotomy crime/law (or else, bad/good), respectively, tend to predominate.

My thesis also aims at clarifying how particular national film styles and generic inflections may impact on nurses' depiction. In this respect, another reason for including Italian screen representations of nurses is that these belong to popular cinema, an area scholars have hitherto neglected (unlike scholarship in British or American cinema). As Louis Bayman and Sergio Rigoletto (2013) argue:

While Pasolini, Fellini, Visconti and Antonioni are icons of the European auteur canon and neorealism is a core unit of academic study, the vast and diverse output that made cinema a key popular form in Italy remains in many ways more unfamiliar (p. 1).

While enriching the mainly UK/US-focused scholarship on nurses' cinematic representation, my analysis of a range of popular Italian films – 1950s melodramas, 1960s horror films and 1970s sexy comedies – thereby offers a

valuable contribution to research on Italian cinema. Even Marga Cottino-Jones's recent book, *Women, Desire, and Power in Italian Cinema* (2010), remains firmly entrenched within canonical Italian auteurs and movements, and ignores the popular films in my corpus, despite the fact that these reached vast audiences.

My familiarity with Italian cinema and language has helped me identify relevant productions and related issues. As a native speaker, I have had access to Italian-language material, in terms of films, scholarly literature and archival documents like film reviews, expanding the sources at my disposal. The wealth of material on the Italian films I have been able to unearth confirms, in turn, the comparison's relevance and potency.

In view of the above, my cross-national analysis of cinematic nurses brings a new and significant contribution to research on the topic *per se*, as well as to studies of the representation of women, national cinema, and the history of nursing – with special regard to Italy. In what follows, I account for the scholarship in these different areas that has supported and substantiated my research.

Theoretical background.

In its pursuit of the image of screen nurses, my thesis's theoretical background is located at the intersection of feminist film studies, film genre and national cinema, and the history of nursing images. In what follows, I indicate how these research areas – feminist film theory, especially – have developed to date, and how they relate to my study. In particular, I examine how feminist film theory has developed dynamic models for studying screen women's

representation that function as key analytical tools for my investigation.

The representation of women

Feminist film criticism has engaged with the issue of women's representation from the early 1970s, when it originated at the juncture of second wave feminism and the beginning of Anglo-American film studies. Theoretical debates within feminist film studies have spanned representation, spectatorship, and sexual difference, as well as film criticism and cultural production. Images of women, in both a political and an aesthetic sense, have been a main point of interest for feminist film theory since its early days. From the late 1970s, feminist film critics broadened the study of gender in film to examine the representation of race, class, sexuality and nation. Interest in popular culture also led to a shift from the initial textual analysis and subject positioning approach to wider cultural studies of audiences and institutions. More recently, the focus on postmodern society, globalisation and technology has raised new and important questions. Notably, feminist film scholars are identified as overwhelmingly Anglo-American and, overall, their studies mainly concentrate on Hollywood. This shall be taken into account in my analysis, focusing on American, but also British and Italian cinemas.

Feminist film scholars tend to identify feminist film criticism's advent with the publication of Marjorie Rosen's *Popcorn Venus* (1973) and Molly Haskell's *From Reverence to Rape* (1974). Both written by American critics, these books examine women's representation within a wide range of films from the 1900s to the early 1970s, spanning most cinematic genres. Their respective film corpus

mainly includes Hollywood productions, although European films are also considered. Notably, both studies are seen as emblematic of the “reflection theory” in which film is considered as a source enabling us to examine women’s changing position in society. Within this approach, the representation of women is seen to mirror how society treats them but, at the same time, it is also frequently deemed to distort women’s “real” position and therefore limit their progress – when looked at from the perspective of feminist politics. The concept of stereotype is key to these analyses: women are examined according to typologies, and typically result in “an array of virgins, vamps, victims, suffering mothers, child women, and sex-kittens” (White 1998: 118), rather than empowered individuals. My study considers how the representation of nurses mobilises stereotypes, and moves these into new subject positions that reframe their image.

A number of feminist scholars have criticised Rosen’s and Haskell’s work. Amongst others, Patricia White (1998) has provided a useful retrospective account of these debates. Dealing with Haskell, for example, White highlights that the scholar “frequently distances herself from feminism, neglects to consider non-white women, and betrays a profound heterosexism”. White also concedes that Haskell has made “several useful contributions, and criticism of the reductionism of her study can itself be reductive” (p. 118). As she shows, one important area of Haskell’s work was about the woman’s picture, a sub-genre of the 1930s/1940s Hollywood melodrama based on women-centred narratives, and designed to appeal to a female audience through the depiction of “women’s concerns”, like domestic life, family, motherhood, self-sacrifice and romance (Doane 1987: 152-3). White (1998) stresses the importance of Haskell’s work was to give the

woman's picture, "denigrated by the industry and most critics" at the time, a greater cultural status; for her, the value of Haskell's work was political, and linked to the fact that these films "did represent the contradictions of women's lives in patriarchal capitalism" (p. 118) – an argument that can be applied to melodramatic representations of nurses.

Haskell's point is one that other feminist film critics, such as Mary Ann Doane, have since further explored and built on, as we shall see. A substantial body of scholarship that departs from Haskell's position has emerged since her analysis. However, it is worth underlining that several recent studies – including Georganne Scheineir's *Signifying Female Adolescence* (2000), Pam Cook's *Screening the Past* (2004), Helen Hanson's *Hollywood Heroines* (2007), and Kathleen Rowe's *Unruly Girls, Unrepentant Mothers* (2011) – still make recourse to the notion of stereotypes to assess the validity or otherwise of screen women's representations.

Backtracking to the 1970s, the first scholars who ever questioned Rosen's and Haskell's work were British "cinefeminists", such as Claire Johnston, Pam Cook and Laura Mulvey. The cinefeminists openly opposed their American colleagues' sociological and "reflectionist" standpoint. Rather than considering cinema as a reflection of reality, the British scholars perceived film as an apparatus, a construction mirroring male fantasies and desires projected literally onto screen images of women, thereby misrepresenting them in the process. Though the cinefeminists' methodology was still significantly textually based, their analysis went beyond the notion of stereotype, examining how film functions ideologically to construct women as signs in a complex textual system, sustaining

and even naturalising patriarchal ideology (Thornham 1997).

The cinefeminists uncovered women's "misrepresentations" mainly through deconstruction, semiotics and psychoanalysis. Johnston's ground-breaking "Women's Cinema as Counter-Cinema" (1973) and "Feminist Politics and Film History" (1975) were especially influenced by semiotics, with Roland Barthes's work on "myth" and auteur theory taken as primary reference points. Psychoanalysis also informed another cornerstone of analysis: Laura Mulvey's "Visual Pleasure and Narrative Cinema" (1975). Mulvey argues that classical narrative cinema – understood as dominant Hollywood narrative cinema – is defined by sexual imbalance in terms of power: woman is the image, the object of the gaze, and man is the bearer of the look – both as a spectator and film character, to which Mulvey adds the camera's third "gaze". Psychoanalysis – which Mulvey defines as a "political weapon, demonstrating the way the unconscious of patriarchal society has structured film form" (p. 6) – is deployed to explain how sexual difference is embedded in film language. Mulvey builds on Freud's concept of scopophilia, or the pleasure in looking, which, she argues, "has been split between active/male and passive/female" (p. 11), and is rooted in voyeurism and fetishism – two ways of mastering the male child's original trauma of castration anxiety. Fetishism disavows the woman's castration by conferring on her body aesthetic perfection, which diverts male attention from her missing penis, thereby making her reassuring rather than dangerous.

Although my focus is not psychoanalytical, Mulvey's study is *de facto* relevant. As predominantly female characters, nurses function as the objects of the gaze, and aspects of their representation – e.g. their costume – involve the notion

of fetishism. As Valerie Steele (1996) highlights, the nurse's uniform is one of the most commonly fetishized objects of male sexual fantasy, in sexploitation films and beyond. Key to this is the fact that the nurse – here symbolised by her uniform – helps (dependant and passive) patients get better by establishing an intimate relationship with them, including in physical terms, acting as a spur to sexual fantasy.

While Mulvey's study has been, and continues to be, enormously influential, it has been criticised for neglecting female spectators. The latter point was redressed in Mulvey's "Afterthoughts on 'Visual Pleasure and Narrative Cinema'" (1981), focusing on one of the genres I examine in the thesis: melodrama. Mulvey stresses that melodramatic women reflect "an internal oscillation of desire" – defined as "a dyadic interdependence between hero and villain" – which "lies dormant, waiting to be 'pleasured'" (p. 129), and with which female spectators identify. Various subsequent feminist studies have built on Mulvey's insights into the gendered gaze. In particular, Jackie Stacey's "Desperately Seeking Difference" (1987) further explored the notion of a female desiring gaze, with genre playing a key role in the determination of the "preferred audience".

While feminist film scholarship has since moved on significantly, the works discussed above still remain relevant to discussions of the representation of women and, thus, nurses. Haskell and Mulvey, especially, have been key starting points in my investigation, foregrounding important questions. One concerns stereotypes that, as I stressed before, remain a relevant issue in scholarly works on screen women's representation. As throughout the thesis I examine the

relationship between nurses' screen images and nursing's social reality, it becomes apparent that nurses tend to be characterised according to particular "types" that often verge on "stereotypes". The latter, for Tessa Perkins (1994) "provide a lot of information very economically. They tell us what to expect. But our expectations may be proved wrong". She adds that while male stereotypes tend to be differentiated and individuated, female stereotypes often remain "shallow [...] reflecting the ideology of femininity as eternal and unchanging" (p. 386). As we see throughout the thesis, the stereotypes nurses embody illustrate a range of female figures, but they are sharply divided along gender lines, the two main ones being the "angel of mercy" on the one hand, and the "battleaxe" on the other.

My thesis examines these representations by paying particular attention to their modulation within the genres I found to be the most prolific in terms of nurses – biopic, melodrama, thriller and comedy – within the three cultural backgrounds I consider – American, British and Italian. For example, UK and US films include celebratory biopics of nurses depicted as "angels of mercy", a type of femininity marked as predominantly white and middle-class, and one significantly involved in the notion of affect (topics to which I will return in this introduction). In American film noir nurses are identified (as women tend to be in film noir) as either *femmes fatales* or "nurturing women". In all three countries, melodramas portray nurses as romantic heroines, while comedies depict them as "sex-kittens" or "battleaxes".

Here it is useful to pause on the term "battleaxe", to which I also return

briefly in chapters one and four. In (British) popular imagery¹ the word battleaxe, deriving from military usage, currently has sexist and ageist connotations, designating a formidable, aggressive older woman. This depends on the fact that, in a patriarchal society, strong women generate male fear: their stigmatisation can be understood as a form of “backlash”. Yet, originally, the battleaxe symbolised a positive image of female strength as a means to “victory” (Jackson 1979). The first “battleaxe” in British history was the Celtic “Warrior Queen” *Boadicea* (AD 60) (Hamilton 1998: 201-4), who even became a Suffragettes’ symbol (Crawford 2001: 305). Queen Victoria became identified amongst the “laudable” British battleaxes (Hamilton 1998: 138-48) along with Florence Nightingale, about whom Julia Hallam (2000) writes: “Nightingale [...] mobilised [...] the figure of ‘the battleaxe’” serving “an explicitly colonialist aim of reforming” (p.10). Christine Hamilton’s *The Book of British Battleaxes* (1998) also refers to prominent female politicians under the label, i.e. Margaret Thatcher. From these positive connotations, the battleaxe became progressively devalued in the 20th century, with Hattie Jacques’s grotesque matrons in the *Carry On* films and Violet Carson’s Ena Sharples in the soap opera *Coronation Street* as emblematic. In my thesis, while I am fully aware of the slide in meaning the term has been subjected to, which today makes it wholly negative, I deploy the concept of the battleaxe in both senses. Thus, Florence Nightingale represents the original, “positive” meaning, while Hattie Jacques’s *Carry On* matrons embodies the now dominant (sexist and ageist), derogatory meaning.

While cinematic nurses frequently fall within the stereotypical

¹ Significantly, the term has no literal translation in Italian.

representations that traditionally characterise screen women, varying according to different genres that are, in some cases, also nationally inflected, my aim in the thesis is to show that nurses embody such feminine stereotypes in *nuanced* ways, and that this modification is due to their professional identity. In this respect, one key question running through the thesis is to what extent nursing as a profession inflects the characters' gendered and generic representations. Underpinning this research aim is feminist work on women's representation in particular film genres, on the one hand, and in particular professions, on the other.

The representation of women in film genres

Melodrama, as David Stanley (2008) also shows, is the most prolific genre in terms of fictional representation of nurses.² This is of special interest, since melodrama can be seen as contradicting the classic construction of women (and, thus, nurses) as objects of the male gaze. Traditionally defined as a “feminine” genre, melodrama (and the sub-genre of the woman's film) is indeed primarily addressed to and watched by women who – as Mulvey's “Afterthoughts” and other studies discussed below indicate – are positioned to identify with the female protagonist. My analysis of a group of films I define as “recruitment melodramas” (which are distinct from recruitment films) confirms this feminine identification process.

The representation of women within specific film genres was a significant trend in post-1970s feminist film theory. Due to its feminine mode of address,

² Recruitment films, which are also prolific, are excluded from my study as they do not meet the criteria of feature films (See: Academy of Motion Picture Arts and Sciences, Rule Two) and because their “would-be-professionals” audience is narrower than the general viewing public.

melodrama was one of the first genres to receive the attention of feminist film critics. Prior to “Afterthoughts”, Mulvey wrote “Notes on Sirk and Melodrama” (1977), a key early text in the critical reclaiming of melodrama; other insightful analyses of women’s depiction in melodrama include Annette Kuhn’s “Women’s Genres” (1984) and especially Christine Gledhill’s seminal work, *Home is Where the Heart is* (1994). Mary Ann Doane wrote about the representation of women in the woman’s film both in “Film and the masquerade” (1982), and in her major work *The Desire to Desire* (1987), where she focuses on female spectatorship and identification. E. Ann Kaplan (1978) examined women in film noir in her eponymous collection of essays – revised and expanded in 1998. Other key contributions to this area include Barbara Creed, who offers in-depth analysis of women in the horror film in *The Monstrous-Feminine* (1993); and by Kathleen Rowe in her ground-breaking *The Unruly Woman* (1995), to which I will return when I discuss comedy.

These feminist revisions of previous studies of genre cinema – which I will outline later in this introduction and refer to in the relevant chapters – are also representative of a much wider feminist production, including studies of genres I have not mentioned here (e.g. the western, the musical). These feminist studies have been highly instrumental in foregrounding connections and differences between images of nurses in particular genres and traditional female stereotypes in those genres. Moreover, they have helped to shape my understanding of how the notion of the “preferred audience” applies to films about nurses – examining, for instance, the (sometimes pejorative) visual objectification of female characters in genres where the audience is assumed to be predominantly male, as in thrillers

and comedies. By contrast, biopics and melodramas about nurses arguably tend to address a predominantly female spectatorship and, not coincidentally, also offer more appealing and “reassuring” portrayals of nurses.

While most of the feminist work discussed above focused on Hollywood, in its process of expansion and diversification the field began to address the representation of women in other national cinemas. Christine Geraghty’s *British Cinema in the Fifties* (2000) and Sue Harper’s *Women in British Cinema* (2000) have been particularly informative in my analysis of British films. In the Italian context, Gordiano Lupi’s *Le Dive Nude* (2005), Stephen Gundle’s *Bellissima* (2007), Marcia Landy’s *Stardom Italian Style* (2008) and Louis Bayman and Sergio Rigoletto’s *Popular Italian Cinema* (2013) have been useful. As in the case of genre cinema, these works are feminist, or feminist-inspired, revisions of wider studies of national cinemas, which I discuss as appropriate in the relevant chapters. For instance, debates around British national cinema and the heritage film inform my analysis of British biopics, where I draw on studies by Andrew Higson (1989, 1995, 1996, 2003), John Hill (1992, 1997), Sarah Street (1997), Mette Hjort and Scott Mackenzie (2000), Claire Monk and Amy Sargeant (2002). Likewise, a discussion of Italian cinema introduces my analysis of Italy’s “spaghetti horror” films and “sexy comedies”, with Peter Bondanella’s (2009) and Gian Piero Brunetta’s (2009) works as key references. Useful accounts of Hollywood cinema include Richard Maltby’s (2003) – which informs my study of melodrama, especially – as well as Christine Geraghty’s (1994) and Steve Neale and Murray Smith’s (2013).

The works above point to different representational trends in each of the

three countries, in relation to given historical periods. British films tend to place particular emphasis on class. More precisely, since the Victorian era, the dominant image of the nurse in British popular culture has been constructed as that of a white middle-class, “respectable” individual, against the actual range of class and ethnic identities among real-life nurses. British biopics and melodramas reflect this middle-class characterisation, unlike British comedies, which often portray nurses as working-class. Conversely, the dichotomy crime vs. law (i.e. bad vs. good) is a key feature in American films, and is especially in evidence in my case study thrillers. A different scenario characterises Italian films where, as we saw, religion is influential and features prominently – unlike in British and American films. Italian working women – including nurses – are frequently portrayed as nuns and/or fallen sexual icons – a trend identifiable not only in (sexual) comedies, but also in melodrama.

The account thus far has offered examples of how feminist analyses of women’s representations have become increasingly diversified since the 1970s. Among these, one area that has been crucial to the focus of this thesis is the analysis of working women on screen.

The representation of working women

Over the past three decades, as part of feminist film studies’ increased specialisation, but also to address a growing area of social reality, scholars have turned their attention to studies of working women. A useful starting point for my research has been Carolyn Galerstein’s *Working Women on the Hollywood Screen* (1989), a filmography of approximately 4500 American films focused on the

category of working women, which outlines the main representational trends for each profession considered – nursing included. About the latter, Galerstein touches on two major points: one is that “nursing [...] is seen as natural for women”; the other is that “romance emerges as the most prevalent theme in nurse movies” since, ultimately, “it is the personal, i.e. romantic choices that matter” and predominate, unlike the nurse’s “professional functions” (p. 259).

The gendering of the profession and the importance of romance are key aspects of screen nurse representation, and of the nurse’s image in popular culture, which surface throughout my thesis. Indeed, nurses are nearly always gendered as “female” in popular imagery, and therefore in the films in my corpus. An intuitive reason for this, as Galerstein also observes, is that nursing is seen as synonymous with the maternal – hence, the feminine. Mothers aside, nurses are virtually the only individuals that, by virtue of their profession, can legitimately establish a very intimate relationship with another human being, including in physical terms – which must be seen in relation to the fact that filmic patients are overwhelmingly male. While this latter aspect is functional to the representation of romance, it also clearly contradicts social reality – both points to which I shall return shortly. That said, history has evidently played a role in the construction of the “nurse/woman” parallel: as numerous studies attest, female nurses have predominated over their male counterparts since the profession’s origin (Campbell 1984; Dingwall, Rafferty & Webster 1988; Judd, Sitzman & Davis 2010; Pascucci & Tavormina 2012).

It is however noteworthy that the idea of a “gendered profession” is not confined to nursing, as the literature on working women attests. Popular culture

labels secretaries and teachers also as typically feminine, almost by default. Social history has, again, been influential. Examining secretaries, Galerstein (1989) highlights that in America “by 1930, 96% of secretaries were women”, and “since 1940 office workers have constituted the single largest occupational category for American women”, concluding: “this is reflected in the long list of secretary films” (p. 331). Likewise, Galerstein underlines: in film “teacher is the only occupational category which realistically parallels the large proportion of employed women who were teachers” (p. 370).

On the other hand, professions such as detectives, lawyers and soldiers are commonly categorised as male. As a result, women who practice such jobs acquire a controversial identity, because of the assumption that they incarnate “the wrong body in the expected place” (Mizejewski 2004: 12). Linda Mizejewski’s *Hardboiled and High Heeled* (2004), Cynthia Lucia’s *Framing Female Lawyers* (2005), Philippa Gates’s *Detecting Women* (2011) and Yvonne Tasker’s *Soldiers’ Stories* (2011) are landmark studies of this topic. Dealing with “military nurses”, Tasker (2011) remarks upon an important point: “the female military nurse does not escape the contradiction between the categories ‘woman’ and ‘soldier’” but “embodies them in a particular manner”, being “not ‘really’ a soldier ‘at all’”. The reason for this, Tasker argues, is that the nurse is “by definition a noncombatant” and “is associated with healing and nurturing and also with sacrifice”, which “provides a mirror for men’s selfless sacrifice in war”. Thus, in the military nurse, “the nobility of war and care are [...] twinned while being divided into separate, gendered spheres of action” (pp. 72-3). This configuration distinguishes screen military nurses from other types of military women, Tasker stresses: “a perception

that women are simply too feminine to cope with the necessity of war [...] does not typically extend to the military nurse” since “both her femininity and toughness are required in wartime”, concluding, “the nurse thus enters inappropriate spaces (male, diseased, disreputable) for redemptive purposes” and, therefore, “allow[s] an atypical articulation of female agency and independence” (pp. 72-5).

While Tasker’s account underlines the nurse’s peculiarity insofar as her “redemptive role” places her slightly apart from other professional women within the general representation of male-identified “gendered professions”, it is however clear that such views of the gendering of professions arise from patriarchal patterns of education and employment, which have led to men dominating leading and prestigious professions or jobs requiring higher education, authority and/or physical force. While recent decades have seen major shifts in gendered employment – with women increasingly numerous in industry, politics and higher education – powerful women professionals, when not neglected or altogether absent from popular cinema, have tended to be stigmatised as fatally flawed characters – whether as mothers, lovers, wives or daughters. The dominant idea is that women’s true realisation can only be found in marriage, family and/or romance – love often predominating over profession.

But whether women are in traditionally male professions, or female ones, there seems to be constant themes to the identity of screen professional women: on the one hand, the imbalance between romance, sexuality and/or motherhood and, on the other, professional activity. In her study of American films from 1930 to 1975, Galerstein (1989) confirms that, notwithstanding her identification as a

worker, “a woman is not defined by her career. Rather, work is either explicitly or implicitly a temporary or secondary involvement, with the major emphasis on romance” (p. xvi). Though in the 1980s careers became increasingly important in the depiction of working women on screen, as shown in Julia Hallam’s 1994 study of *Working Girl* (US, 1988), these women workers were “stigmatised” as extremely competitive, sometimes bitterly hostile to each other and prone to hysteria, to the point of being unable to control their behaviours and emotions. Moreover, despite the importance of careers, romance still featured as an essential element of the plot. A return to the more traditional “romance over career” model has, instead, characterised the cinematic working woman in the more reactionary postfeminist era, whose impact on the media sphere was evident from the 1990s (Tasker and Negra 2007: 8). Diane Negra (2009) has indeed observed that a recurrent plot type in films portraying postfeminist women workers concerns “the abandonment of a job that was fundamentally menial and service-class rank to be glorified through romance and family” (p. 88).

The overlap of love and profession, with romance and/or sexuality often portrayed as the prevailing elements, can also eventually undermine the working woman’s value as a professional. In this respect, Lucia (2005) stresses that female lawyers are “represented as professionally inadequate”, and ultimately identified as “interlopers who do not truly belong within the legal arena” (pp. 22-3). Ginette Vincendeau (2014) spots similar patterns in the biopic – a genre traditionally celebrating its protagonists, often for their professional merits – by identifying as a “mytheme” of “the female biopic [...] the elevation of romantic love over professional considerations”. Negra (2009) identifies similar symptoms in

postfeminist romantic comedies, stating: “the contemporary chick flick has regularly offset the threat of the urban ‘career woman’ by establishing her use of workplace resources as a means in the pursuit of romance” (p. 87). The “workplace/romance” axis will be discussed also in my analysis of screen nurses, their love stories being often set in hospitals – a feature that frequently diminishes their professional credibility.

Generally, sexuality is also a distinctive trait of screen working women. Galerstein (1989) stresses: “in the movie workplace, women are usually regarded as sex objects and possessions by the men for whom they work, as well as other men in their lives” (p. xvii). Even nuns (and, thus, nuns as nurses) can inspire sexual fantasies due to their “inaccessibility”, both in emotional and physical terms, as accounts of “nunsploitation” films highlight (*See*: Nakahara 2004). My analysis shows that this sexualised idea of nuns – and nurses – is not true of exploitation cinema only, but emerges also in other genres, i.e. melodrama. Judith Mayne (1995) identifies in the term “working girl” even “a code for ‘prostitute’” (p. 95). Tasker (1998) makes a similar point, foregrounding Hollywood’s “insistent equation between working women, women’s work and some forms of sexual(ised) performance” (p. 3).

Thus, the representation of the working woman shows certain recurrent (and arguably conservative) traits, which have survived virtually intact across the decades. Romance features as a compulsory element in most plots and, ultimately, tends to predominate over career ambitions, thereby also undermining the working woman’s value as a professional. Sexuality is another frequent element, which in turn undermines women’s role as professionals – or, as Tasker (1998)

suggests, makes their identification as workers “limiting or exploitative” (p. 6).

Overall, the depiction of nurses similarly displays the range of representations discussed above, though they vary according to different genres. Except in the biopics, marriage, family and/or romance are key narrative ingredients (Galerstein 1989, Hallam 2005, Stanley 2008): melodramatic, thriller and comic plots often involve a nurse/patient-doctor romantic liaison. In comedy, the nurse tends to embody more overt sexual meanings, usually becoming the object of sexual desire – again, of patients and/or doctors (as already mentioned, this explains why, in most nurse films, doctors³ and patients tend to be men – a feature which clearly contradicts social reality).

The representation of nurses

As female professionals, nurses follow many of the patterns identified in the feminist scholarship on working women. At the same time, nurses obviously exhibit specific features. They have thus elicited the interest of a number of scholars, from different research angles – including feminist approaches. Among them, three names stand out: Beatrice and Philip Kalisch, Julia Hallam and David Stanley. In 1980, the Kalischs, American professors at the Nursing School of the University of Michigan, published their first article on fictional nurses. Fifteen further pieces and two books⁴ followed, the last of which, *The Changing Image of the Nurse* (1987), is especially significant: it examines in chronological order –

³ As Galerstein (1989: xiii) underlines, popular culture includes doctors in the category of “male-dominated jobs” by default.

⁴ Kalisch, B. J. & Kalisch, P. A. (1982, 1983, 1983a, 1983b, 1983c, 1983d, 1984). Kalisch, B. J., Kalisch, P. A., & Mchugh, M. L. (1982). Kalisch, B. J., Kalisch, P. A., & Scobey, M. (1981, 1983). Kalisch, P. A., & Kalisch, B. J. (1980, 1981, 1982a, 1982b, 1982c, 1985, 1986, 1987). Kalisch, P. A., Kalisch, B. J., & Clinton, J. (1982).

from the 19th century to the 1980s – how nurses have been represented in the media, referring to the press, literature, television and cinema. In their view, each period showcases dominant (stereo)types. Numerous international films about nurses are considered (though none of them is Italian), spanning both features and TV series. The Kalischs' approach is predominantly descriptive: each account essentially provides information about film plots and nurse-characters' profiles. These accounts are inserted within specific historical/cultural contexts, which further substantiate the scholars' views on how different films depict nurses. Questions of gender and race are occasionally considered, though not systematically and without close attention to the specificities of the film text.

Besides the Kalischs' oeuvre there have been a few works dealing with the media representation of nurses⁵. The most pertinent to my research are overall distinguished by a descriptive character, and show a thematic-based approach to the study of the nurse's image. Amongst these, David Stanley's "Celluloid Angels" (2008) has been useful, offering a classification of 280 western films about nurses made between 1990 and 2007 into different genres, plot types, and themes (associated to particular stereotypical images). While he defines his methodological approach as both quantitative and qualitative (p. 85), the analytical part is very brief, consisting of a short paragraph that categorises films according to their prevailing theme, in the manner of a content analysis. However, while Stanley's article constitutes essentially a taxonomy of films about nurses, it makes a profitable contribution to my research, in part because it highlights a

5 Except for Buresh, B. & Gordon, S. (2000), the rest of the literature on the topic corresponds to articles: Salvage, J. (1983); Austin, J. K., Champion, V. L., & Tzeng, O.C.S. (1985); Bridges, J. M. (1990); Sullivan, E. J. (1999); Gordon, S. & Johnson, R. (2004); Jinks, A. M. & Bradley, E. (2004); Ferns, T. & Chojnacka, I. (2005); Eisner Bayer, B. (n.d.); Farella, C. (n.d.).

number of neglected titles.

By far, the most relevant work to my study of the representation of nurses is Julia Hallam's *Nursing the Image* (2000), written from the standpoint of feminist cultural studies. The book analyses nursing's professional image and identity within a range of media – from literature to advertising, the press, television and cinema – from the 1940s to the mid-1970s. Hallam's discussion includes diverse theoretical perspectives – involving issues of gender, class, race, age, sexuality, geography and the deployment of stereotypes – combined with the more empirical reference to interviews, historical sources and archival materials. Although this study focuses on the British context, references to American culture are present. A more specific focus on the film medium is offered in Hallam's "Angel, Battleaxes and Good-Time Girls" (2005), a chapter in a collection of essays on medicine and cinema. The piece examines the representation of nurses in British cinema, from the aftermath of WW2 to the 1970s especially, and with a focus on melodrama and comedy – the genres most in vogue in terms of nurses' depiction during those decades. Hallam also includes references to American films.

The representation of nurses: femininity, race, class and affect

Through the work of Hallam and the Kalischs, especially, we can see that the representation of nurses relates to patterns identified in feminist scholarship with screen depictions of working women: on the one hand, through nursing's identification as a female gendered profession; on the other, through the prominence of romance and sexuality and, most significantly here, the way romance supersedes career. However, three other areas need special attention

when it comes to nurses' representation, namely race, class and affect.

One striking factor is that nurses are virtually always depicted as white, both as individuals and as a group/category. For a long time this aspect has been ignored by scholarship as studies of the representation of race have traditionally been concerned with skin colour, otherness, Orientalism and exoticism (See Bogle 1994; Bobo 1995; Saïd 1995). Since the 1990s, however, the issue of whiteness has been central to scholarly debates on race and representation, including within feminist studies. Richard Dyer's ground-breaking *White* (1997) highlights that in western media culture being white is presented as symbolic of the human race as a whole. He argues that both film language and the western star system further reflect and reinforce this reality. Christianity is seen as influential in this regard, as it generated what Dyer defines as "the culture of light". In this context, whiteness has come to epitomise purity and goodness, as opposed to "non-whiteness", equated with corruption and badness. This point is clearly important to my study, especially when it comes to the biopics of historic nurses, in particular Florence Nightingale: her association as a white middle-class woman with goodness and light is paradigmatic, as is evident from the title of *The Lady With a Lamp* – which my discussion of lighting technique further demonstrates.

Using the notion of "respectability" as an analytical tool, Beverly Skeggs foregrounds similar concepts and combines them with class in *Formations of Class and Gender* (1997): "respectability contains judgments of class, race, gender and sexuality and different groups have differential access to the mechanism for generating, resisting and displaying respectability" (p. 2), adding:

The classic case is the symbolic representation of Black women [...] as atavistic, animalistic and inhuman, in order to legitimate the practices of slavery and colonial exploitation. Likewise, the representational denigration of White working-class women blocks their capacity to convert their cultural capital into symbolic capital to gain other capitals and ensure material security (p. 11).

Examples of the “white working-class’s denigration” are examined in my analysis of the British *Carry On* nurses. Likewise, “white middle-class respectability” is a key point in my discussion of nurses in biopics and melodramas. British films, especially, offer telling examples of the above class-based dichotomy. As I mentioned earlier, a particular concern about class is peculiar to British cinema (*see* Street 1997), as it is more generally to the cultural history of Britain (*see* Skeggs 1997), where modern nursing originated. The latter is thereby inscribed into Britain’s class-based mentality (a topic I shall return to later in this introduction, as well as in chapters one and four) and, since Nightingale’s day, the profession has been “keen to boast of and maintain its middle-class credentials” (Hallam 2000: 39) against the looming threat of its proletarianisation. Skeggs’s work (1997) concentrates precisely on the ethnographic context of North West England – although, as she argues, her study “does have a more general address” (p. 2), which is confirmed, for example, by the similar views on (black) people echoing in works such as Giovanna Tomasello’s (2004) concerning the perceptions of Africans in colonial Italy.

In light of the above, the fact that Suzanne Leonard (2007) has observed, and even defined as “predictable” that “the modern working woman is [...] white and upper or middle-class” (p. 101) is relevant. Leaving momentarily aside the class issue, it is worth considering how the binary opposition “white-good-pure/black-bad-impure” applies to the working woman – a figure that, as we saw, is frequently associated to the “impure” idea of sexuality, including when the character is white. However, Tasker (1998) explains:

The popular cinema’s constant framing of women in terms of sexuality is in turn re-framed and modified by discourses of race. Whilst for white performers these stereotypes can produce major roles, such opportunities are rarer for Black women, already operating in relation to stereotypical construction of sexuality (p. 4).

Hollywood’s chosen identification of the working woman with sexuality would then be based on a neat distinction: on the one hand, the black woman, who is marginalised and, by default, conceived of as “the sign of the whore” (Guerrero 1993); on the other, the white woman who, though sexualised, remains a respectable, upper/middle-class professional. Various scholars, including Tasker (1998), Lucia (2005) and Negra (2009) (*See also*: Tasker & Negra 2007), have foregrounded the association of female professionals with upper/middle-class individuals. Examining female lawyers, Lucia stresses that white women workers benefit from a certain type of education, which enables them to become

professionals, thus “casting the challenge to patriarchy in bourgeois terms” (p. 22).

Nurses’ traditional image in popular culture also aligns itself with white, middle-class femininity, at least since Nightingale’s reform. In the historically-grounded *Women at War with America* (1984), D’Ann Campbell argues that following the example of “Florence Nightingale, Edith Cavell and Clara Barton [...] young women aspired to become nurses, a career Americans felt was suited to the presumed innate skills and impulses of women” as well as “an excellent preparation for the marriage” (p. 49). Campbell also adds that in 1945 America “nurses represented a truncated cross section of the class structure, with the very wealthy and the very poor underrepresented”. Significantly, within the nurses’ group, “only 2 per cent of all registered nurses in the country were black” (p. 53).

Focusing on Britain, Julia Hallam identifies similar patterns in *Nursing the Image* (2000). She points out: “Nightingale (re)presented images of the Victorian middle class mother, ‘the angel in the house’, as nursing’s feminine ideals”; besides, “the power of white femininity, with its cultural associations of chastity, purity, cleanliness and spiritual truth, was used by Nightingale in her attempt to persuade the male-dominated Victorian public sphere to support her programme of reform” (pp. 10-1).

Considering the sexual, class and race components underlying the nurse’s image, Campbell’s and Hallam’s studies lead to a closer investigation of the relationship between the social reality of nurses and their cinematic representation. Examining female workers in general, Galerstein (1989) observes a “lack of correlation between Hollywood’s fictional and America’s real

workforce”, based on the fact that Hollywood’s “employed woman was in a distinct minority as compared with the great majority women shown in non-working roles” (p. xiii). The split between reality and representation also characterises nurses, with race/class issues the main point of interest.

Concentrating on America, Campbell (1984) stresses that in the 1910s, the racist and classist system controlling the profession made black women’s access to nursing practically impossible: “the highly segregated structure of hospitals, training schools, and nurses’ associations blocked their movement into the field” (p. 50). The situation did not change until 1948, when the American Nurses’ Association opened its membership to black nurses, enabling them to benefit from professionalising nursing practice (Hine 1989). Elia Kazan’s *Pinky*, the first American film I found to focus on “nursing and racism” – and to display black nurses – was released one year after this major civil rights victory, in 1949. Notably, that same year also witnessed Britain’s first ever recruitment of black nurses (of Caribbean origin, especially) since the foundation of the NHS in 1948 (Baxter 1988). However, black nurses’ first appearance on the British silver screen only occurred in 1959, in Basil Dearden’s *Sapphire* (Hallam 2000), in which a black nurse is seen in one brief scene.

In light of these historical/cinematic trends, the lack of black nurses in film over the first half of the 20th century might appear as plausible, overall. The same, however, cannot be said of films released from the 1950s onwards: white nurses still predominate, although the presence of black and minority ethnic groups nurses in the profession in Britain and the US has increased.

Two recent surveys of American nursing – the 2010 US Department of

Health and Human Services Administration's, and the 2013 Health Resources and Services Administration's – confirm what I argue above through empirical evidence: although the majority of nurses are white, the presence of non-white nurses remains significant, and its proportion of the workforce increases where lower qualification is required. Thus, registered nurses' ethnic background in the US is 75,4% white, and 24,6% non-white – including Black/African-Americans (9,9%), Asian (8,3%), Hispanic/Latinos (4,8%), American Indians/Alaska Natives (0,4%), and Multiple/Others (1,3%). For licensed practical nurses, the percentage of non-white employees increases up to 36,8%, of which 23,6% is Black/African Americans.

Similar figures characterise the UK: the Heart of England NHS Foundation Trust's "Nurses and ethnicity" 2013 survey foregrounds that 66,86% of registered nurses are white and, amongst the non-whites, the predominant ethnicities are Black (9,32%, including Nigerian, Somali, British African, Caribbean and Other) and Asian (8,48%, including Indian, Pakistani and Other). Back in 2000, Hallam already highlighted that in Britain "black nurses" corresponded to "large numbers in the workforce", and criticised the fact that, despite this, black women were denied "specificity across a range of representation and discourses" and "in nursing history" (pp. 158-9), to the point of feeling disorientated and discriminated against.

Thus, the nurse's image in popular culture overall conforms to the traits that, more generally, characterise working women: since the profession's origins, nurses have indeed been identified as white and middle-class women. As Dyer (1997) highlights, western culture and mentality have been influential to this end;

and, as Hallam (2000) remarks, so has the historical context within which nursing acquired its modern identity: Victorian Britain.

As well as involving class and race, it is important to stress that, as a “caring profession”, nursing is also, importantly, involved with emotions. In *The Emotional Labour of Nursing* (1992), the British nurse and sociologist Pam Smith writes about the importance of expressing emotional care in nursing through an elaboration of the “emotional labour” concept, which the American sociologist Arlie Hochschild (1983) first employed to describe “the induction or suppression of feeling in order to sustain an outward appearance that produces in others a sense of being cared for in a convivial safe place” (p. 7). Drawing on nursing, sociological and feminist literature, Smith (1992) argues: “as emotional labourers [...] nurses have to work emotionally on themselves in order to care for patients”, with the head nurse playing a fundamental role in supporting/educating student nurses to this end. Smith affirms that one can only learn to care in a caring climate, “the caring ward”, where the observance of “the little things of caring”, e.g. gesturing, is ensured (p. 17).

As part of the range of screen representations of fictional nurses on offer, my thesis looks at how they “perform” their emotions as part of their professional duties. Important to my study is the way the recognition of the importance of emotions in nursing meshes with the application of affect theories to the media sphere. Drawing on the complex philosophical and critical concept of “mimesis”, Anna Gibbs (2010) offers a useful application of it to the topic under investigation here in terms of “facial expression’s activation and response” (p. 191) – providing a useful articulation between emotion within professional practice and affect as

deployed through representation. Similarly, discussing contemporary French political films, Lauren Berlant (2011) talks of how “the mild theatricality of intimate spaces is sustained by gestures and tones of caring” (p. 220). Despite the different context, Berlant’s formulation is relevant to the films discussed in this thesis, as “gestures and tones of caring” frequently characterise scenes between nurses and patients.

Such modes of displaying caring – which, in British films especially, typically attach to middle-class nurses – are overall perceived as “reassuring”, by patients as well as by the audience: as potential patients, film viewers want to see images of a selfless, caring, and empathetic nurse, whose features instil faith in her professionalism. Analysing doctors in American and British TV medical melodramas from a feminist perspective, Anne Karpf (1988) and Julia Hallam (1998) come to similar conclusions: “medical melodrama has traditionally staged [...] the individual’s sense of [...] helplessness, of feeling out of control of one’s own body and its functions and needing to entrust that care and control to another”, here identified with the physician “as a healer” (Hallam 1998: 26). My feature films corpus reveals that the “healing touch” also characterises biographical and, to some degree, melodramatic nurses. Conversely, thrillers and comedies ultimately tend to enhance nurses’ selfishness and ineptitude, which the contrast with the healing and caring attitude expected of them accentuates. In this thesis I examine the representational trajectory of nurses through this affect-based distinction: Part One, devoted to biopics and melodramas, presents overall reassuring portrayals of nurses; in contrast, Part Two, on thrillers and comedies, considers images that disrupt and challenge the classic template of the nursing

image.

In view of the above, an important question follows: what does “professionalism” mean in nursing? Examining “the professional status of nursing” Christine Wynd (2003) underlines that the topic is still “subjected to [...] debate”, involving “historians, sociologists and nurses themselves” (p. 251). Historically, nursing emerged as an occupation for women, at a time “when male-oriented definitions of professionalism prevailed and male attributes were valued” (p. 251); nursing thereby acquired a subservient status to the predominantly male medical profession (Davies 1995; Wynd 2003). One consequence of this was the delayed and ambiguous development of nursing autonomy (Freidson 1988) – the latter being considered a major feature of professionalism (Boss 1996) – which led scholars to define nursing as either a “profession manqué” (Carr-Saunders & Wilson 1933) or a “semi-profession” (Etzioni 1969).

Such definitions of nursing were criticised, in 1995, by Celia Davies: she deemed them to be representative of an “old” concept of professionalism, since they developed from classic male models of what the term means. Promoting the concept of “new professionalism”, Davies re-theorised the position of nursing through the notion of “interdependence” (rather than “independence”), one that she judged to fit more fully within “female” professional models. Prior to Davies, Andrew Abbott (1988) had already approached the question of “interdependence” by talking of a “system of professions”. Influenced by the work of the American sociologist Everett Hughes, Abbott considered the ecology of work and the social interaction between professions – topics that had been hitherto fairly neglected – paying particular attention to how power is mobilised within these relations.

While the nurse's image and representation embody many of the contradictions associated with women's role in society more broadly, this is accentuated in the case of nurses' professional representation, where that *embodiment* is both literal and metaphorical. Nurses draw their power in cinematic form from being "body workers". This, however, simultaneously elevates and undermines their status in symbolic terms, situating them closer to nature than culture (Rafferty, 1996). Moreover, the ambiguous nature of nursing work and its proximity to domestic labour further reinforces this ambivalence. Significantly, nursing work is often hidden from the camera in filmic as in broader representations, rendering the nature of nursing expertise invisible. This is compounded by the elevation of the emotional and affective at the expense of the socio-technical and organisational components of nursing work.

This marginalisation of expertise sutures the nurse into a stereotypically subordinate position. Indeed, we do not often see her perform as an accomplished clinical expert, operating within a distinctive sphere of competence in which she freely exercises her authority. Rather, where authority is present, it is more often a moral authority (as in biopics) or it is marked by ambiguity and ambivalence (as in my examples from the thriller genre). Filmic representations make these ambivalences and contradictions much more apparent in film than they appear in writing, a point I pick up in my discussion of the contribution my study makes to Medical Humanities. My analysis will consider how the notion of power relations applies to cinematic nurses, taking into account the position they occupy in the films I examine, and thereby also evaluating if different genres and national cinemas influence such positioning.

Research aims, corpus and organisation of the thesis

My thesis aims at building on the valuable insights the scholars discussed above offer, and developing beyond their interventions in a number of ways, through an analysis of fiction films, categorised under specific genres. The focus on Italian cinema is my study's first distinctive element. Stanley (2008: 87) includes a few Italian titles in his "films by year" table, but does not offer any further detail about these productions. Studying Italian films about nurses has enabled me to expand current research on popular Italian cinema as well as to highlight substantial discrepancies among American, British and Italian filmic representation of nurses – something that, in turn, is attributable to the different cultural and nursing histories in the three countries. In this latter respect, the different manifestations of American, British and Italian nursing histories, have been important empirical reference points in my discussion. They have provided a more thorough understanding of the differences underlying the portrayal of nurses in the three national contexts – which, as I highlight at various points throughout the thesis, see a relative neglect of the nursing profession in Italy, compared to America and Britain. The predominance of diverse genres within each national cinema also suggests these countries' different approaches to nursing: a striking example is that Italy seems not to have produced any biopics of nurses, unlike Britain and America. My comparative case studies aim to further highlight such differences, and provide possible answers for a more comprehensive understanding of these differentials.

The choice of my corpus also needs to be specified here. My focus in this

thesis is firmly on the cinema; unlike the Kalischs and Hallam, I do not include other media, such as television or the press. Moreover, under the label of “nurse films” I include only feature films in which nurses play lead roles. Therefore, with a few exceptions, I do not consider the numerous films where nurses are incidental marginal figures and are confined to “silent background presences [...] without agency” (Hallam 1998: 33). My overall corpus includes over 250 feature films, ranging from silent cinema to the contemporary period. Although I have been able to watch the majority of them, on VHS, DVD and in film archives in the UK and North America, difficulties in the availability of silent films have meant that I had to remove them from my central corpus. Thus, my earliest case study, *Night Nurse*, is from 1931. As I detail later, 16 films are examined in particular detail – many of which have been neglected by scholars to date. I also offer focused textual analysis of a number of films in addition to the central case studies, including some 21st century productions that have not been considered in works on the representation of nurses so far.

Given my emphasis on fiction film and the categorisation of the corpus in generic terms, genre scholarship has been particularly useful to my approach. George Custen (1992) as well as Tom Brown and Belén Vidal (2014) inform my work on the biopic. Among the substantial literature on melodrama (some of which is discussed under feminist film theory earlier in this introduction), I have drawn particularly on Peter Brooks (1976) and Christine Gledhill (1994). Martin Rubin’s (1999) study of thrillers has been a key reference point in chapter three, along with James Naremore’s (1998) and Andrew Spicer’s (2002) works on film noir, and Mark Jancovich’s (2002) analysis of the horror film. In addition to

Kathleen Rowe (1995), Steve Neale and Frank Krutnik's (1990) as well as Kristine Brunovska Karnick and Henry Jenkins's (1995) studies have supported my analysis of comedy. These works, and others, will be discussed as appropriate in the relevant chapters.

My genre-based corpus has also enabled me to identify and unearth either (relatively) neglected or still unexplored (as recent) films, most of which also involve famous actresses. These include Gina Lollobrigida in *Woman of Straw* (UK, 1964), Renée Zellweger in *Nurse Betty* (US, 2000) and Halle Berry in *New Year's Eve* (US, 2011). The importance of (female) stardom to the representation of nurses is another key point of discussion in my analysis, influenced by star studies (Dyer 1979, Gledhill 1992, Stacey 1994), as star personas have been influential on their characterisation. Particularly telling examples include Anna Neagle's embodiment of British national identity through her looks, voice and performance style; Silvana Mangano and her inflection of the religion/sexuality duality in *Anna* through the emphasis on her face and on costume; Joan Fontaine and the deployment of her "innocent" aura in American film noir; and Ursula Andress in terms of how the film makes strategic use of her "Bond girl" body in *L'infermiera*. Beyond the stars featured in my case studies (including Audrey Hepburn and Barbara Stanwyck in addition to those mentioned above), other famous actresses have played nurses in their career – some, more than once: Loretta Young, Carole Lombard, Claudette Colbert, Rosalind Russell, Madeleine Carroll, Juliette Binoche, and Keira Knightley are examples. Indeed, as we can see from this list, the feminisation of the nursing profession on screen has had the "side effect" of providing major roles for female stars. However, since the

melodramas of the 1940s and 1950s constitute a peak in the representation of nurses in major roles on screen, the phenomenon will be explored in particular detail in chapter two.

This point leads to my work's third characteristic: textual analysis as the main vehicle. My study of fictional nurses significantly relies on the analysis of stylistic and generic elements that, while defining the characters, also create additional meanings within the films (Perkins 1972; Bordwell 1985; Gledhill & Williams 2000). These elements involve all aspects of *mise-en-scène* and cinematography, including décor, acting, costume, iconography, lighting and sound, in order to understand the visual and sonic construction of the figure of the nurse in more detail. While previous studies of cinematic nurses of course do consider some textual aspects, I have sought to explore in depth relevant textual practices where they illuminate further the representation of nurses. For example, I examine the importance of lighting in creating the “saintly” identity of Cavell and Nightingale in the biopics; and of sound in enhancing the melodramatic struggle of Mangano's Anna and the evil nature of the “noir nurse” Stella Madden. Throughout my analysis I explore the way these elements, in addition to genre and national identity, both inflect in different ways the depiction of nurses, and how some traits nevertheless do recur in such portrayals, across genres and national cinemas.

To sum up, my thesis aims to interrogate how the professional identity of cinematic nurses may (or may not) inflect the traditionally gendered representation of women – and, more specifically, working women – often, but not exclusively, characterised along stereotypical lines. In examining these

representations, feminist film theory, as we have seen, is my main analytical tool; this, however, must also be qualified in terms of the existing variations amongst the American, British and Italian national cinemas, in two major ways: through the prism of generic traditions, on the one hand and, on the other, social and cultural backgrounds, especially regarding the place of nurses in each national context. My analysis also considers elements that crucially cut across generic and national female depictions, namely race, class, and affect.

To this end, my study aims to answer the following research questions: in what ways is the cinematic representation of nurses shaped by their gender within society's patriarchal structure? What is the importance of professional matters, as opposed to romance/marriage/sexuality, in the screen portrayal of nurses? How influential are cinematic genres and national contexts in these depictions? To what degree are screen images of nurses in sync with – or ahead of/behind – social developments in the profession's history? What is at stake in nurses' filmic representations as, overwhelmingly, white and middle-class? How do fictional nurses perform their emotions? Do nurses' cinematic representations reflect the notion of "emotional labour" that lies at the basis of professional nursing care?

Structure

My thesis is structured in two parts. Part One examines the representation of nurses in biopics and melodramas, the focus of chapter one and two, respectively. The choice of these particular genres depends on both representational/affect and cross-cultural issues – which I explore both through the focus on a single country, Britain (chapter one) and through two cross-cultural comparisons: between

America and Italy (chapter two, first section), and between America and Britain (chapter two, second section).

Chapter one mainly deals with British nurses Edith Cavell and Florence Nightingale, and takes British director Herbert Wilcox's *Nurse Edith Cavell* (US, 1939) and *The Lady with a Lamp* (UK, 1951) as case studies. Amongst the films analysed in my thesis, these two films are possibly (and, perhaps, inevitably) those that scholarly research on nurses' cinematic representation has most frequently examined. However, my reading of Cavell and Nightingale builds on and expands previous studies, by considering Britain's cultural inheritance in terms of national cinema, social and nursing histories, and by deploying a reading of the "battleaxe" figure that refers to its "original" connotation.

Chapter two includes two main sections. The first offers a comparative analysis between two melodramas – one Italian, and one American – both featuring religious nurses as protagonists: Alberto Lattuada's *Anna* (IT, 1952) and Fred Zinnemann's *The Nun's Story* (US, 1959). This cross-cultural analysis sees Italy's and America's cultural and nursing histories as key references, informing and sustaining my arguments. A central theme of this section is the concept of "redemption". Chapter two's second section examines a group of American and British melodramas – released between the 1930s and the 1950s – whose overall narrative and style are reminiscent of the recruitment films for nurses in those decades – and which I thus call "recruitment melodramas". I especially concentrate on S. Sylvan Simon's *Four Girls in White* (US, 1939) and Pat Jackson's *The Feminine Touch* (UK, 1956).

Before proceeding, I should highlight that chapters one and two in Part One

are not introduced by a general passage, as is the case for chapters three and four in Part Two. The reason is that the genres dealt with in Part One – the biopic and melodrama – are the object of an overall consensus in terms of their scholarly definition, showing far less blurred contours than the thriller, comedy and their sub-genres. Thus, while the generic characteristics of biopics and melodramas are analysed within their respective chapters, the chapters on the thrillers and comedies are preceded by a general introduction that seeks to define these genres' more complex boundaries and sub-categories.

The juxtaposition of thrillers and comedies in Part Two is not only due to their common, intrinsic complexity. The reason concerns also issues of representation and affect. Women in thrillers and comedies are often “punished” and/or subject to derogatory representations, which arguably renders them more problematic to a female audience, especially from a feminist point of view: they embody stereotypically demonic features (the *femme fatale*), are deprived of feminine attributes (the “monstrous feminine”), become grotesque individuals (the aged shrew), or targets of sexual objectification (the sex-kitten). My first enquiry in planning these chapters thereby was: what happens when the woman considered is a nurse? Other questions followed. Are nurses only – or mainly – exploited in these genres? If so, in what terms?

Chapter three focuses on the detective thriller, film noir and horror. My first case study is William Wellman's *Night Nurse* (US, 1931). As for film noir, I examine Reginald Le Borg's *Calling Doctor Death* (US, 1943) and Norman Foster's *Kiss the Blood of My Hands* (US, 1948). The section on horror thrillers especially concentrates on Philip Ford's *Valley of the Zombies* (US, 1946), and

Mario Bava's *I tre volti della paura/Black Sabbath* (IT, 1963), with their nurse-protagonists seen as variations on Creed's "monstrous feminine". Chapter three opens the discussion on Part Two's key question, "hybridity", which the case studies in chapter four further develop and complement.

Chapter four examines different types of comedy: "romantic", "comedian" and "erotic". The first two types are discussed through Gerald Thomas's *Nurse on Wheels* (UK, 1963), *Carry On Nurse* (UK, 1959), *Doctor* (UK, 1968) and *Matron* (UK, 1972). A largely neglected trend in film scholarship, Italy's *commedia sexy* is the focus in my analysis of erotic comedies. My case study is Mariano Laurenti's *L'infermiera di notte/Night Nurse* (IT, 1979).

I see this thesis, first, as a contribution to the development of the various research areas I have outlined: the representation of (working) women, genre and national cinema (in particular popular film genres), cultural studies, the image of the nurse and nursing histories – in the Italian context especially. This work is also my own way to "do justice", with filmic evidence, to a category of women that, for some reasons, and in different ways, are often cast in derogatory terms. I hope this work will lead to a more nuanced reading of the screen representation of nurses.

PART ONE

CHAPTER ONE: Nurses in Biopics¹

This thesis begins with some of the most prominent filmic representations of nurses: biopics of historically famous representatives of the profession – in particular Florence Nightingale and Edith Cavell. M. Keith Booker (2011) offers a useful overview of the genre. Biopics focus on “the life stories, or significant portions of the life stories of real world individuals” and, more specifically, of a “single” individual “of substantial historical importance” (p. 42). Accordingly, the narrative tends to be complex as it needs to include substantial material. This explains why the genre became prominent only in the sound era, “when more complex narration [...] became possible” (p. 42). The western biopic’s golden age is identified with the 1930s, and with directors like William Dieterle – whose numerous successes include *The White Angel* (US, 1936), a biopic of Florence Nightingale. The end of WW2 signalled the genre's decline in popularity in Hollywood, although notable biopics have continued to characterise international cinema to date, especially over the last decade, which Booker identifies with the genre’s “resurgence” (p. 43).

In this chapter I concentrate on two biopics: Herbert Wilcox's *Nurse Edith Cavell* (US, 1939) and *The Lady with a Lamp* (UK, 1951), portraits of Edith Cavell and Florence Nightingale, respectively. Whilst these nurses’ historical importance has clearly been pivotal to my selection of these films, other biopics of Cavell and Nightingale exist – among them Dieterle’s *The White Angel* and other films I mention below. Thus, my selection of case studies depends on further

¹ Based on this chapter, I published: Babini, E. (2011). “Nursing, Britishness and the War: the cinematic representation of British nurses in biopics”. *Women’s History Magazine* 65, 26-32.

factors. Firstly, Cavell and Nightingale are famous for being key figures both in nursing and British history. As such, both have become British national heroines. Secondly the two biopics have a common British “matrix”: they both feature the British (and married) couple of Herbert Wilcox, the director, and Anna Neagle – the star and the epitome of “Britishness” in film at the time (Street 1997: 162). These shared elements enable a fruitful comparison, unmatched by any other biopics of Cavell and Nightingale. Moreover, these two films were released over a particular historical period, with WW2 and its aftermath ushering in Britain a recruitment drive for nurses – a goal that *Nurse Edith Cavell* and *The Lady with a Lamp* possibly served, and which has thus made the study of their respective depictions even more compelling. Furthermore, while offering a celebratory portrayal of Cavell and Nightingale, the protagonists of *Nurse Edith Cavell* and *The Lady with a Lamp* appear more historically grounded than, for example, the heroine of Dieterle’s “highly romanticized” film (Booker 2011: 42), as I shall discuss later.

Unlike other cinematic genres on the same subject, the corpus on “biographical nurses” is relatively small, amounting to a dozen feature films for the whole of American and British cinema. Italy seems not to have engaged with biopics about nurses. It is noteworthy that despite the dramatic potential of Italian history, as Carlo Celli (2011) argues, “the Italian film industry has produced relatively few biopics [...] apart from some films in the silent period and [...] early sound period” (p. 97). The lack of biopics of nurses is clearly part of this phenomenon.

In American and British cinema, Cavell’s and Nightingale’s lives have been

narrated in at least six biopics in addition to my case studies. Four deal with Cavell – Percy Morgan's *Nurse and Martyr* (UK, 1915), John G. Adolfi's *The Woman the German Shot* (US, 1918), Charles Miller's *The Great Victory, Wilson or the Kaiser* (US, 1919), Wilcox's *Dawn* (UK, 1928) – and two are about Nightingale – Maurice Elvy's *Florence Nightingale* (UK, 1915) and Dieterle's *The White Angel* (US, 1936). Amongst the few biopics of nurses not centred on these two figures are Victor Saville's *I Was A Spy* (UK, 1933), and Dudley Nichols's *Sister Kenny* (US, 1946). The first deals with Belgian nurse Marthe Cnockhaert, who assisted German soldiers during WW1 while passing intelligence to the British. The second focuses on Australian nurse Elizabeth Kenny, whose new approach to the poliomyelitis cure became fundamental to physiotherapy. Both films feature major stars, Madeleine Carroll and Rosalind Russell, respectively.

The relatively limited number of biopics of nurses depends partly on that the genre, as we saw, mainly relates the life story of “the famous” (Custen 1992: 2). As nursing history attests, although millions of nurses have been significantly engaged in the profession since its beginning, Nightingale and Cavell certainly are the most famous. As previously mentioned, besides their exemplariness, both having dedicated a great part of their existence to the profession, their fame also relies on the importance Britain has conferred on them as national heroines. These factors’ merging has been undeniably significant to these nurses’ repeated depiction in high-profile film productions.

Thus, complying with the biopic’s celebratory aim, the characterisation of *Nurse Edith Cavell*’s Cavell and *The Lady with a Lamp*’s Nightingale is constructed along affirmative lines. Some of the positive values on display, such

as care and maternal affection, are recurrent in most cinematic depictions of nurses, as we shall see, but are here particularly prominent. Others, like the vocation for nursing – in a quasi-religious, and thus a-sexual manner – as well as self-sacrifice, are given extraordinary importance, besides being the reasons for Cavell's and Nightingale's elevation to the status of British national heroines. While this emblematic aspect has made British national identity central to my discussion, it has also encouraged me to reframe my use of the term “battleaxe” towards its more positive (and, in fact, original) associations, namely with strong, authoritative women, as explained in the introduction, in contrast to the current sexist and ageist meaning of the term.

The combination and embodiment of such “reassuring” features as care, sacrifice and affection, have made the protagonists of the two biopics considered particularly relevant case studies for my research. Unlike most films my thesis examines, *Nurse Edith Cavell* and *The Lady with a Lamp* have been paid a significant degree of critical and scholarly attention to date. My own analysis builds on existing studies, in part through textual analysis, enabling me to identify Cavell and Nightingale as icons of “Britishness”, “sanctity” and “professional authority”. My examination also brings to light and discusses a number of questions contributing to research on women’s representation, national cinema, the nursing image’s history and cultural studies, all crucial reference points in the development of my argument.

1.1 Nurses as icons of Britishness, sanctity and professional authority:

Herbert Wilcox's *Nurse Edith Cavell* and *The Lady with a Lamp*

Over the course of about 20 years, Herbert Wilcox directed three historical biopics focused on nursing: *Dawn* (UK, 1928), *Nurse Edith Cavell* (US, 1939) and *The Lady with a Lamp* (UK, 1951). The first two productions deal with Edith Cavell (1865-1915), the British nurse who worked in Brussels during WW1 and was sentenced to death by German authorities under the accusation of espionage. The last film depicts Florence Nightingale (1820-1910), the “mother of modern nursing” who, among other things, was committed to the profession’s humanitarian cause during the Crimean War.

Cavell’s biopic concentrates on the last years of her life, while Nightingale’s covers a much longer period. This latest aspect, however, does not prevent either of the films from complying with the biopic’s canonical features. Adhering to George Custen’s (1992) definition of the genre, both *Nurse Edith Cavell* and *The Lady with a Lamp* “depict the life of a historical person [...] and are mediated through the creation of and competence in symbol systems” (p. 5). Significantly here, Custen also argues that biopics “created public history” (p. 3), stressing: “in each generation [...] the ways in which [...] lives are explained shift subtly” depending on “the prime focus of public curiosity” (p. 7).

1.1.1 Britishness

Following *Nurse Edith Cavell*'s and *The Lady with a Lamp*'s respective premières, many reviews saw patriotism as both biopics’ salient feature. On 4th October 1939, for instance, *Today's Cinema* (53, 4321) commented on *Nurse*

Edith Cavell: “Few films have been more timely in their patriotic urge than this film enactment of the heroism of Nurse Cavell”. Similarly, *The Monthly Film Bulletin* (18, 213: 1951) stressed how *The Lady with a Lamp*’s protagonist was portrayed as both “the gentle lady [...] comforting dying patients in the wards of Scutari, and [...] the tireless and extremely business-like administrator”, qualities which deserved to be “finally [...] awarded the Order of Merit” (p. 341).

The consensus on these two British films' patriotic character, as well as their focus on heroines from the past, raises important questions of generic definitions, which in turn connect to wide-ranging debates about national cinemas – the two being closely connected when it comes to British cinema, with special regard to the contested category of the “heritage film”. Andrew Higson (1989, 1995, 1996, 2003), John Hill (1992, 1997), Sarah Street (1997), Mette Hjort and Scott Mackenzie (2000), Claire Monk and Amy Sargeant (2002) are amongst the key scholars who have focused on British cinema’s representation of the past.

The films examined in this chapter are located at the intersection of British national cinema and, broadly speaking, films set in the past. Before proceeding to the films’ analysis, I need to give an indication of the relevant scholarly debates that have attempted to account for such productions’ complex generic identity. Higson (1995) defines national cinema under four headings: economic, text-based, in terms of consumption (audience) and criticism-led. The text-based (or representation) category is the most relevant to me here. As he puts it:

National cinema can be defined in terms of representation

[...] with what films are about. Do they share a common

style or world-view? Do they share common themes, motifs or preoccupations? How do they project the national character? How do they dramatize the fantasies of national identity? (p. 5)

To provide an account of the sense of Britishness – the projection of “the national character”, as Higson puts it, and thus the national past – underlying Wilcox's productions, it is crucial to evaluate which elements characterise such biopics as “period films”. In this respect, Monk and Sargeant argue: “British period cinema encompasses an extraordinary spectrum of genres”, mainly identified with “the historical or costume genre” – which also includes the “1940s costume melodrama”² and “quality film”³ – as well as “the heritage film”. However, such generic “strictures” – the scholars stress – “have made period films one of British cinema’s most contested strands, and in specific cases – notably the [...] costume melodramas [...] and the ‘heritage films’ [...] – they

² During and just after WW2, the British Gainsborough Studios produced a very popular series of “costume” melodramas, known as “Gainsborough costume melodramas”. These include: *The Man in Grey* (1943), *Fanny by Gaslight* (1944), *Madonna of Seven Moons* (1944), *The Wicked Lady* (1945), *Caravan* (1946) and *Jassy* (1947). Sue Harper (2000) highlights: “these films have a rich visual texture, and evince a preoccupation with the sexual mores and lifestyle of the upper reaches of the landed classes. They all contain female protagonists [...] who actively seek sexual pleasure and whom the plot ritually excises by the end [...] [Their] audience was specifically female, and the films received unparalleled critical opprobrium since they did not conform to the criterion of ‘good taste’ [...] However, they are crucial in any mapping of the field of popular taste in the 1940s”. (98-9).

³ British 1940s “quality films” are identified with a group of productions released between 1942 and 1948. John Ellis (1996) stresses that 1940s Britain was characterised by increasing discussions on national culture and the need for a “quality indigenous cinema” that would mirror the British character and ideals to both foreign and British spectators. Pam Cook (1996) adds: “the criteria for a quality national cinema were defined in terms of opposition to Hollywood spectacle in favour of an austere realism”, with an “emphasis [...] on ordinary people in contemporary settings” (53). These films failed to meet popular consensus: the only alliance of opinion was “between producers and critics [...] the Ministry of Information Films Division, the Foreign Office and the British Board of Film Censors”, namely those who “conferred the status of ‘quality’” (52-3). Examples include: *Our Aircraft is Missing* (1941), *Next of Kin* (1942), *Million Like Us* (1943), *The Demi-Paradise* (1943), *The Way Ahead* (1944), *Brief Encounter* (1945), *Great Expectations* (1946), *Black Narcissus* (1947).

have become targets of official or critical attack” (pp. 1-4).

The most influential definition of heritage cinema comes from Higson (1996): “a strand of contemporary cinema, and especially British cinema”, heritage films “operate primarily as middle-class quality products, [...] tend to be valued for their cultural significance” and show “an elite, conservative vision of the national past”, besides being largely identified with “adaptations of [...] prestigious literary and theatrical properties” (pp. 232-3). Higson’s definition above referred originally to films made since the 1980s⁴, which theoretically makes the heritage category of little relevance to 1930s-1950s biopics. However, he also queries whether “the heritage film [is] distinct from other costume drama or period drama or historical films, or [...] a cycle within those genres”, to which he adds: “we should recognize that all genres and cycles are hybrid categories [...] and otherwise, each film the product of its particular historical conditions of existence, each cycle or genre emerging as it evolves, constructing [...] its own intertexts” (p. 234).

Discussing how the National Trust, founded in 1895, “has always been a major player in the heritage market”, Higson enlarges the heritage cinema category, arguing: “cinema has always played a part in this heritage project, and heritage cinema has since the 1910s been a vital plank in efforts to construct, maintain and reproduce a national cinema in this country”. He also adds: “when I use the term heritage cinema in this historical context, I am probably using it more loosely than when identifying the fairly tight and self-contained cycle of recent

⁴ Examples include: *Chariots of Fire* (1981), *A Room with a View* (1986), *Howards End* (1992), *The Madness of King George* (1995), *Sense and Sensibility* (1996), and *Shakespeare in Love* (1998).

years” (p. 234), concluding with his wish to map out “a much longer trajectory of British films which invoke the idea of national heritage as part of the bid to construct a distinctive national cinema drawing on indigenous traditions.” (pp. 236-7). Higson remarks that he applies these arguments to Maurice Elvy’s patriotic biopic *Nelson* (1918), adding: “indeed, we can find numerous films even from the turn of the century which in various ways mobilize heritage discourses”, including “films which drew on the nineteenth-century cult of the national hero” (p. 237) – similar to the biopics I analyse in this chapter.

The debates sketched out above establish both the British period film’s generic hybridity and the relevance of the “heritage cinema” debates to them. A further hybrid category to consider here is the “historical film”, whose use James Quinn and Jane Kingsley-Smith (2002) resist as they consider it a catch-all genre label, unlike Marcia Landy (1991, 2000) and Sue Harper (1994), who confer on it “broad definitions of historical, to include biopics of famous monarchs and fictional stories with historical settings/period costumes” (Street 1997: 49). In view of these controversial debates on strict genre categories, I have chosen to adhere to Monk and Sargeant’s “broad” definition of British period film, and concentrate on how *Nurse Edith Cavell* and *The Lady with a Lamp* – “period biopics” – convey ideas of British national identity through a representation of the past. Given the films’ overall characteristics and the framework of British cinema, my focus will be the concept of cultural identity as a system of shared national values – as Higson’s (1995: 5) account suggests.

The subsequent analysis is divided into two parts: the first explores the diverse expressions of Britishness affecting the films’ protagonists; the second is

founded on a counter approach, illuminating the British nationhood signs through a comparison between “Britishness” and “non-Britishness”, namely between the films’ protagonists and non-British characters. To conclude, I explore whether the national ideals these biopics celebrate might have any further, veiled intention, either on a historical or political level.

What does being British mean? Britishness as a set of distinctive values

In order to examine Cavell and Nightingale’s Britishness as represented in the films, I first make a brief detour through debates about national identity. Hill (1992) bases the concept of cultural identity on the notion of diversity. Hence, to provide a reliable representation of a society, it would be worth taking into account the peculiarities of the many identities co-existing in that context. Prior to Hill, Benedict Anderson (1983) had also treated this theme, by promoting his influential idea of the “nation as imagined community”, based in part on the idea that “the members of even the smallest nation will never know most of their fellow members, meet them, or even hear from them, yet in the mind of each lives the image of their communion” (p. 6).

It would however be reductive to consider the ideas of nationhood and national identity solely in terms of difference. In this regard, a further suggestion comes from Michael Billig (1995), in whose opinion having a “national identity” means “to possess way of thinking about nationhood” and to be “situated physically, legally, socially as well as emotionally [...] within a homeland, which itself is situated within a world of nations” (p. 8). Higson (1989) had offered a similar reading when he underlined that “to identify a national cinema is first of

all to specify a coherence and a unity; is to proclaim a unique identity and a stable set of meanings” (p. 37). On her part, Hjort (2000a) dedicates an article to the “themes of nation” starting from the assumption that “national cinemas [...] are to an important extent thematically defined” (p. 103).

Besides these theoretical studies, it is also worth mentioning Jessica Jacobson’s (1997) empirical investigation. By interviewing London-based British-Pakistanis, Jacobson concludes that within “the cultural boundary of Britishness” to be British might mean, among other things, “to exhibit supposedly ‘typical’ British moderation, tolerance, reserve and modesty” (p. 193). Although Jacobson’s work relates to a different period and context to the films I examine, her study provides empirical evidence about people’s first-hand opinions on the matter. Interestingly, the same views on Britishness also typify studies dating back to earlier periods, closer to the time of Wilcox’s productions. For example, Geoffrey Gorer’s 1955 *Exploring English Character* foregrounds: “modesty [...] is considered by most a national characteristic, in which individuals vary very little” (p. 286). As for the concept of moderation, Gorer includes this trait as one of his investigation’s basic premises, commenting: “the English do not easily give way to their impulses” (p. 22). I shall therefore start my analysis of *Nurse Edith Cavell* and *The Lady with a Lamp* with the moments that best represent the traits Jacobson and Gorer outline.

Ideas of moderation and reserve affect both nurses’ characterisations. By taking for granted these virtues’ supposed Britishness, it is possible to argue that Neagle’s nationality and star persona, besides enabling her to speak with a middle-class British accent, is an important element in the iconicity of her representation

of respectability. In *Nurse Edith Cavell*, both moderation and reserve are two of Cavell's fundamental traits. In this respect, one scene is particularly meaningful: it not only depicts Cavell's sober and discreet behaviour, but also dwells on the profound nostalgia she feels for her hometown, Norwich. The sequence's opening image shows Cavell administering treatment to a British soldier.



Figure 1.1



Figure 1.2

The couple (figure 1.1) is the frame's focus, and the light picks out their faces in the darker surrounding. Cavell stands opposite the injured man, who is seated, and they are shown in profile. The man's posture recalls that of the religious supplicant, above whom Cavell towers in administering to his needs. This configuration emphasises social and symbolic distance as well as gendered role reversal, with Cavell's status and iconicity elevated to an almost sacred level, since she seems to anoint her patient. The section on Cavell's "sanctity" will illustrate that her association with a quasi-religious icon recurs in the film. But focusing here on how the scene conveys a sense of Britishness, it is first of all noteworthy that Cavell appears austere and composed: in silence, she delicately tends to the patient, and is entirely absorbed in the procedure. When the man

mentions Norwich, which is where he also comes from, the camera moves in, and frames Cavell in close-up. She slowly raises her head and stares at the horizon: a soft light illuminates her eyes, which become the frame's focal point (figure 1.2). Thus, the spectators' attention is entirely directed to her gaze. Meanwhile, Cavell has stopped working since what she heard has made her mind wander, in a state of quasi-ecstasy.

These images are crucial, as they depicts not just Cavell's visible characteristics – her “typically British” calm and decorum – but also her moderation and reserve: despite the deep nostalgia for her hometown, which is further evidence of her British strength, she remains calm and hardly externalises her feelings, giving in fact only a hint of them. Finally, before the camera cuts back to the man, Cavell breaks her silence, by whispering with melancholy: “Norwich. [...] It's my home; even my love”. Dialogue therefore is also significant in expressing Cavell's distinctive Britishness.

Modesty and tolerance – the latter assuming here a sort of “stoic” character – are features affecting both nurses. Nightingale's character embodies such virtues paradigmatically. Amongst others, *The Lady with a Lamp* displays Nightingale's self-effacing behaviour in the film's very last sequence when, now in her old age, she is informed about being awarded the Order of Merit. Nightingale's modest attitude is mainly expressed through dialogue, although Wilcox's direction choices and Neagle's performance also play an important role to this end.

The scene opens by focusing on Nightingale's assistant, Miss Bosanquet (Sybil Thorndike, who played Cavell in Wilcox's *Dawn*, 1928), who walks towards the old lady. Once Bosanquet is close to Nightingale (figure 1.3), she

stops and proudly tells her: “You are the first woman to be so honoured”. Subsequently, the camera moves in on Nightingale, shot now in medium close-up (figure 1.4). From this favoured perspective, and speaking very slowly as a consequence of being very old, Nightingale eventually replies: “Too kind, too kind! I only did my duty”. The close-up, the lighting – an increasingly bright aura surrounding Nightingale's profile – and Nightingale's white clothes (a recurrent element in the representation of nurses as “virtuous”, as we shall see) inevitably conjure up a saintly demeanour, which further reinforces the quasi-religious abnegation of this paradigmatic British heroine. Although Nightingale never looks straight at the camera – another sign of her modest nature – the spectators' attention is entirely drawn towards her.



Figure 1.3



Figure 1.4

Tolerance is another distinctive trait of Neagle's Nightingale. A revealing example in this regard is a sequence depicting her attempt at calming one of the British nuns who joined the Crimean humanitarian mission: Sister Wheeler (Maureen Pryor). Momentary discouragement overwhelms the religious woman, who voices her discomfort to Nightingale. Wheeler's tone is accusatory and her

manner aggressive: she is prey to panic and cannot say anything apart from “I can't stand it any longer!”, shaking Nightingale’s arms.



Figure 1.5



Figure 1.6

The way Wilcox constructs the scene is significant. Initially, Nightingale sits down and Wheeler stands (figure 1.5). They stare at each other, but their gazes evidently suggest different feelings: Nightingale's expression reveals sincere compassion, whereas Wheeler is clearly shocked. Suddenly, their position changes: this time, Nightingale stands above Wheeler, who is now seated (figure 1.6). Although Nightingale at this point dominates Wheeler, her behaviour is nothing but deeply tolerant, in a maternal way. Indeed, holding Wheeler's hands, Nightingale patiently reassures her: “I am suffering as much as you are, but until I receive the doctor’s permission, I can do nothing”. The idea of tolerance is therefore constructed through a series of different elements working together, such as the actors' performances – in particular their poses, gestures and facial expressions – and the director's framing choice. All these components, supported by effective verbal exchanges, converge to underline Nightingale’s supreme tolerance in the face of a semi-hysterical colleague.

Wilcox's Cavell and Nightingale thereby seem to fully comply with core elements of what has been identified as distinctive features of Britishness. Nonetheless, the question of “what to embody national values means” can be investigated also through the contrast between British and non-British individuals (*See*: Hjort 2000a: 113).

Britishness among non-British people

In “Themes of Nation” (2000a), Hjort stresses that: “an intercultural approach to the thematization of nation uses contrasting cultural elements to foreground and direct attention toward specifically national elements” (p. 113). Using this observation as a starting point here I will compare Cavell's portrait in *Nurse Edith Cavell* with that of a non-British character. This approach ought to be productive since, apart from the final scene – illustrating Cavell's memorial service in Westminster Abbey – the film is set in Brussels, the city where Cavell spent the last years of her life and was finally executed. This section also focuses on the topic of “moderation”, already discussed in the previous section in relation to the scene where Cavell comforts the soldier from Norwich. The goal is to verify whether similar points can be made in terms of a comparative analysis between the British Cavell and the non-British characters that surround her.

The film includes two significant sequences portraying the relationship between Cavell and the Belgian Mme Rappard (May Robson): one describing the women's reactions when facing danger, one illustrating their behaviour when receiving good news.



Figure 1.7



Figure 1.8

The characters' expressions and gestures are key to conveying the idea of moderation, as the images above display (figures 1.7 and 1.8). Rappard frenetically runs towards Cavell (figure 1.7): her face reveals fear, and so does her tremulous voice, while she shouts breathlessly. Moreover, her hands shake so nervously that Cavell can do nothing but affectionately grip them in hers, when they eventually face each other. Rappard's evident fright contrasts with Cavell's distinctive firmness. Cavell's gaze is impassive, and so is her general countenance. Motionless, she stays opposite the frightened Rappard, and looks at her. The camera shoots this from a distance, following Rappard's actions. Then, as soon as the latter joins Cavell, the director cuts to move closer to them (figure 1.8). From this new perspective, their different expressions become clearer as does, by contrast, Cavell's characteristic behaviour of moderation and self-restraint against Rappard's excess.

The substantial difference between Rappard and Cavell emerges, again, from the scene where the Belgian lady, having just received good news about her relative – a young soldier – is prey to enthusiasm.



Figure 1.9



Figure 1.10

When the scene starts, the camera follows Rappard, who enters the door and starts running excitedly towards Cavell (figure 1.9). Again, Rappard can hardly control her body movements: she shakes her hands, while holding the letter about the boy. Moreover, she still talks loudly, although her voice's timbre has now changed, revealing joy rather than panic. Finally, when Rappard reaches Cavell, the camera stops and gives prominence to both, facing each other (figure 1.10): from this angle, the contrast between their bearings is even more evident and, undeniably, self-control still distinguishes Cavell. One further confirmation of this comes from Cavell's close-up, concluding the scene (figure 1.11), and enhancing her reserve through a focus on her deep but impenetrable look – which, at the same time, also betrays a vague sense of satisfaction.



Figure 1.11

The analysis above has pointed out that, in Neagle's interpretation of Cavell, the sense of national identity is conveyed both through her own behaviour and through the comparison between British and non-British individuals. Neagle performs affect by displaying calm demeanour, compassionate tolerance and strength through gestures and facial expression. She thus achieves the self-restraint and moderation of emotions often perceived to be crucial to the nurse's professional character – a topic which Anne Marie Rafferty's *The Politics of Nursing Knowledge* (1996) in relation to nurses' training, and Pam Smith's *The Emotional Labour of Nursing* (1992) discuss in depth, and to which I shall return shortly. But, importantly, in these films such qualities are also clearly equated with British national characteristics. This goes towards explaining Cavell's and Nightingale's status as British heroines in nursing history. Yet, both nurses' Britishness is the result of a number of other factors, in large part determined by the historical/political context of these films. The following, concluding section discusses this theme.

Why is Britishness a core feature?

As we saw, the notion of Britishness on screen results from a combination of elements. In these biopics, Neagle's nationality and star persona are crucial: her south-eastern middle-class English accent and general demeanour clearly epitomise dominant notions of British national identity. With regard to Neagle's "received pronunciation" English, Street (1997) argues: "in terms of Britishness,

sound films were immediate signifiers of national identity” and this precisely “through speech” (p. 48). When these biopics were released, Neagle was one of British cinema’s most prominent actresses; interestingly, too, *Nurse Edith Cavell* and *The Lady with a Lamp* are only two of several other biopics featuring British heroines in her career, as we will see.

Acknowledging Neagle's key role in communicating the sense of British national identity, Street again argues: the actress “stand[s] metonymically for a particular construction of Britishness and femininity during the 1930s and the 1940s” (p. 162), since her figure “epitomised middle-class values of [...] stoicism and feminine modesty” and “represented a resolutely British, non-European and white identity” (p. 165). Neagle's Britishness therefore appears to encompass traits that are generally identified with British culture in popular imagery. The same features also chime with Cavell’s and Nightingale’s traditional representations in popular mythology. Paraphrasing Vron Ware's (1992) view, Hallam (2000) argues: “the value of white femininity with its cultural associations [...] was used by Nightingale in her attempt to persuade the male-dominated Victorian public sphere to support her programme of reform”. Hence, “in her ambition to forge a profession for women [...] Nightingale (re)presented images of the nurse as Victorian middle-class mother” (pp. 10-1). According to Katie Pickles (2007), Cavell holds a similar iconic value: “as well as serving as a symbolic martyr [...] Cavell embodied the ideal White British woman citizen, and was upheld as a role model, and became a part of the imposition of British cultural hegemony” (p. 4).

Arguably, one of the enduring legacies of the cult status of Cavell and Nightingale is that white middle-class femininity has become synonymous with

the nurse in popular imagery, despite the nursing workforce's much more complex, real-life class and racial configuration – in Britain as elsewhere. In this respect, Mary Poovey (1984) examines how femininity has been textually constructed as an ideal since the 18th century, through the concept of the “lady”. The latter was advocated in texts and illustrated material for women, from the beginning of the 18th century to the end of the 19th. Whereas in the 19th century, “white middle-class femininity was defined as the ideal”, Beverly Skeggs (1997) also adds that women lacking such prerogatives could “rightly” be deemed as “inferior”, or else “not respectable” (p. 99). In this light, this chapter also touches on how such issues of class and ethnicity in the image of nursing may have affected recruitment of a multiracial workforce, bearing in mind that the films discussed here were made at a time when “foreign” nurses were not being recruited in significant numbers – something which is true of *Nurse Edith Cavell*, especially (See Dingwall, Rafferty & Webster 1988).

Turning back to Neagle's seeming embodiment of typically British and “respectable” aspects of the figure of the nurse, it is worth exploring further why Wilcox decided to foreground Britishness as one of these biopics' most relevant features. As already mentioned, the two films show an evident patriotic character. Besides reviews – of which I provided an example previously – this assumption finds support in what we can infer from both Wilcox and Neagle's autobiographies. These books, besides underlining the two nurses' national value as, significantly, “war heroines” (Neagle 1974: 116), who deserved the praise even of – at that time – “Princess Elizabeth” (Wilcox 1969: 191-2, Neagle 1974: 181), also touch on the accusations concerning Wilcox after the release of both

Nurse Edith Cavell and, 10 years earlier, *Dawn* (see: *Kinematograph Weekly* 1928 1088: 43, and 1090: 55, and 1095: 33; *Bioscope* 1928 74, 1118: 62, 65-6, and 1119: 31, and 75, 1120: 30, and 1122: 18). James C. Robertson's "*Dawn* (1928)" (1984) offers a detailed account of this latter episode:

Dawn [...] provoked at the time of its production the hardest fought British censorship struggle of the entire inter-war period. This was ultimately to involve not merely the British Board of Film Censors (BBFC) but also the Foreign Office and even the Cabinet. However, all that was revealed to contemporaries through parliamentary debates, the press and film journals was pressure from the German embassy in London [...] for the suppression of *Dawn* in Britain, leading in turn to Foreign Office pressure on the BBFC [...] This report was repeated in the German press, and the German Foreign Office took alarm presumably because the projected film might revive the spirit of wartime Germanophobia in Britain and damage Anglo-German relations (p. 15).

These questions cannot be underestimated, as they stress the legitimate reservations regarding public opinion in delicate historical moments, over the production of patently patriotic films. *Nurse Edith Cavell* and *The Lady with a Lamp* were produced in 1939 and 1951, thus just at the beginning of and a few

years after the end of WW2, in the aftermath of the allied forces' victory. In this light, it should be no surprise to read what Wilcox (1969) himself wrote with reference to *Nurse Edith Cavell*: “The Second World War had just started and I was accused of intelligent anticipation in making this piece of 'blatant propaganda'. Nothing was farther from my mind” (p. 124). Interestingly, Neagle (1974) provided a very similar note:

One thing did distress both Herbert and myself. With the war on the horizon we intended this to be an *anti-war* film; when it was shown, our intentions were frequently misunderstood. We were often either accused of, or congratulated on, making war propaganda - the *last* thing we had in mind (p. 116).

Wilcox and Neagle, who married in 1943, clearly wanted to free the director from blame in their retrospectively written autobiographies. Nevertheless their writings are interesting: they comment on people's legitimate curiosity about Wilcox's real aim. In this respect, it is worth stressing that conveying national propaganda through film was common practice in 1940s Britain. The case of the “quality films”⁵ is emblematic. With governmental bodies involved in their production, these films aimed to promote British culture and ideals, attempting to meet popular consensus through an “emphasis [...] on ordinary people in contemporary settings” (Cook 1996: 53). Higson (1996) also foregrounds

⁵ See also footnote 2.

propagandistic dynamics in relation to the English heritage film tradition, even though the tradition affected principally middle-class culture and mobilised elite discourses. The latter, Higson argues, “have a cultural resonance much wider than the films themselves. And this suggests [...] a powerful cultural over-determination to read the heritage film precisely as heritage film”, concluding: “this is not to imply some governmental conspiracy but to indicate something of the way in which images circulate in public culture” (p. 244). Assessing whether *Nurse Edith Cavell* actually was war propaganda is not my prime concern. Nonetheless, it is noteworthy that the film shows a number of parallels between its WW1 setting and the historical background against which it was made, namely the conflict between the UK and Germany during WW2.

The Lady with a Lamp can also be read as patriotic filmmaking. In this respect, the film not only benefits from Neagle's performance, but also from a number of renowned London locations, and from references to several British personalities who lived in Nightingale's time, i.e. Queen Victoria and Minister of War Sydney Herbert. Furthermore, Neagle's autobiography (1974) is, again, relevant to Nightingale's celebration. The star remarks on Nightingale's national value, stressing, for example that for “the London première [...] Their Royal Highnesses, Princess Elizabeth and Prince Philip had consented to attend [...] Princess Elizabeth congratulated me and said, 'What a fighter she [Nightingale] was'” (p. 181). Being Britain's core symbol, the Royal family's participation in the event and esteem for Nightingale further heightens her importance for the nation.

The sense of Britishness arising from *The Lady with a Lamp* was also over-determined in other ways. The 1951 date of the film's release, in the aftermath of

Britain's WW2 victory, also coincided with the 90th anniversary of the establishment of the Nightingale Training School at St Thomas' Hospital (London). Moreover, Neagle had at that point played the lead in three other Wilcox biopics depicting the lives of emblematic British heroines: Queen Victoria in *Queen Victoria* (1937) and in *Sixty Glorious Years* (1938), and a Resistance fighter in *Odette* (1950). All these films were released over the course of just 15 years, at the peak of Wilcox's success. At that time, he was considered “the third major producer of historical films”, these being often seen as “submerged in the overall call to patriotism and collective consciousness about being British” (Street 1997: 51).

The 1950s also marked a crucial phase in Britain's nursing history. To start with, in 1948 the NHS “began for real”, Adrian O'Dowd argues in “NHS Nursing in the 1950s” (2008). Other noteworthy facts characterised the years preceding this event, during which *Nurse Edith Cavell* came out. In the 1930s, a general discontent among nurses gave prominence to professional associations and trade unions. Nurses' complaints focused on low salaries, unacceptable working conditions and low-grade training. By the decade's end, most recruits therefore turned out to be lower middle-class and working-class women (Dingwall, Rafferty & Webster 1988), contrary to the prevailing cinematic image.

Significantly, a similar situation had occurred in the late Victorian period – in opposition to what the “respectable” ideals forged around Nightingale's figure, and which Nightingale herself promoted to free nursing “from the taints of its lower-class origins” (Hallam 2000: 18), advocated – with the profession seen as one of the “white blouse” jobs undertaken by women exclusively to earn a living.

Christopher J. Maggs (1983) stresses that, from 1881 to 1914, nursing was far from being a job for the “daughters of the higher social classes” (p. 38) – as the famous nurse Ethel Bedford Fenwick had hoped (Abel-Smith 1960: 57) – adding that “even the most ardent supporter of” Bedford Fenwick’s “line was forced to admit that it could only result in a chronic shortage of nurses [...] since there were just not enough such paragons willing to enter the ‘calling’” (Maggs 1983: 38).

Turning back to 1930s Britain, despite several campaigns aimed at restoring the overall image of nursing, principally for recruitment purposes, only in 1937, following a series of demonstrations against the British government, nurses could actually begin to hope for real changes in their conditions. In 1942, the Beveridge Report advocated a comprehensive state welfare system, covering all kinds of illness prevention and cure. This reform became law in 1946, as the NHS Act, and the NHS was actually established “on 5 July 1948, bringing family practitioner services [...], hospital services and community-based services into one organisation for the first time” (O’Dowd 2008).

Nurses’ position within this new welfare system was included in the Minister of Health’s agenda. After WW2, when care assistance represented an absolute priority for the country, a considerable shortage of nursing trainees became apparent. This caused the British government to recognise the pressing need for increasing nursing recruitment and, concurrently, redefining these professionals’ status within the new NHS. A 1948 circular, *The Nursing and Domestic Staff in Hospitals*, represented a first step towards this goal. In 1949, The Nurses Act was eventually passed, while the syllabus regulating nurses’ educational training was completed and approved in 1952. Despite these

achievements, nursing recruitment in Britain was less successful than expected. In the post-war boom, the NHS still struggled to recruit sufficient nurses to ensure the viability of the new service, a fact that nursing organisations failed to capitalise on to improve the prospects of nursing as a career to the British public (Dingwall, Rafferty & Webster, 1988).

In 1949, this led to a recruitment campaign in the Commonwealth countries, which the British Ministries of Health and Labour in conjunction with the Colonial Office, the General Nursing Council and the Royal College of Nursing devised. Selection committees were established in 16 British colonies; trainee nurses, with different educational and economic backgrounds, were recruited from a number of countries – including Malaysia and Mauritius – though the majority were Caribbean. Interviewing nurses from the latter group, Linda Ali (n.d.) writes:

Until 1986 [...] most Caribbeans, like other Black nurses, were placed on the two-year SEN [State Enrolled Nurse] course. Due to racial discrimination few were accepted on the SRN [State Registered Nurse] despite possessing the requisite qualifications [...] After their two year basic training, most of the women found they could not get onto the higher level course, and certainly ‘couldn’t get promoted at all’.

Thus, discrimination marked most black nurses’ experience in Britain. The unequal treatment they received in concrete career terms, as described above, was

not the only reason. Black nurses also suffered in a more diffuse way from the symbolic hegemony of white middle-class ideals that characterised mainstream nursing images. Referring to her own experience as a nurse, Smith (1992) highlights that: “photographs contained in the prospectus [...] showed images of young white women [...] Images of male and black nurses were noticeably absent” despite the fact “the nursing in Britain is not a homogenous group”, insofar as “class, gender and racial composition may vary according to grade, specialty, institution or region”, concluding: “the predominant image of the nurse as white, middle-class and female prevails and affects the content of their [black/male nurses’] work, training, and public and professional expectations and prospects” (p. 21).

Black nurse Ly’s testimony in Hallam (2000) foregrounds similar concepts:

The main problem that black nurses have had to face in England is being seen differently [...] as outsiders [...] Until recently both public and professional images of black nurses identity in Britain were very marginalised and, as a result, not available as role models to young women (p. 159).

Thus, the hegemonic styling of the nursing image as white and middle-class has clearly contributed to a sense of disorientation and racial discrimination amongst non-white nurses, with implications in terms of professional aspirations and performance. Until recently, black nurses were absent from most visual

nursing representations, including in advertising. Cinema – and British cinema in particular – failed to depict black nurses, an omission that affected nursing recruitment. Arguably the earliest British film displaying a black nurse, Basil Dearden's *Sapphire*, was released only in 1959, a decade after Britain's recruitment campaign in the Commonwealth countries. It is noticeable however that, besides playing a minor role, *Sapphire*'s black nurse speaks with a middle-class English accent. This is likely to have lessened the impact of this black nurse's pioneering representation in British cinema among non-white audiences. The latter had to wait until the 1970s to see black nurses featured more prominently in British audio-visual productions: Peter Nichols's 1973 satirical film *The National Health or Nurse Norton's Affair* and, in the mid-1970s, the TV series *Angels*.

In light of the above, it is thus appropriate to investigate the role of *Nurse Edith Cavell* and *The Lady with a Lamp* in terms of recruitment – over a period in which, as we saw, the call to nursing was not particularly welcome in Britain. In spite of this, according to the testimony of nursing professionals in charge at the time of the films' release, these productions actually had a considerable influence on many young women, whom Neagle's nurse inspired to take up the career. For instance, Miss H., the Sister Tutor of nurse training at the Liverpool Royal Infirmary, argued that in terms of recruitment "Hollywood-style films featuring famous nursing heroines such as Edith Cavell and Florence Nightingale were far more influential" than many other productions explicitly aimed at this purpose (Hallam 2000: 41-2) – the latter being discussed in chapter two. Furthermore, her performances' overall positive result both at a personal and social level delighted

Neagle (1958), declaring in an interview: “the portrayal of nurses has given me great personal happiness, and I am indeed gratified if the nursing profession has found my portrayals satisfying”.

It is thus evident that a reliable analysis of Wilcox's Cavell and Nightingale cannot be set aside from the historical, political and social contexts accompanying the two biopics' release. Considering both nurses' glowing biographies, enhancing the value of Britishness as their most relevant feature was a clear choice: the promotion of these values on the wider scale was embedded, on the one hand, in a widespread discourse of patriotism and national support, and on the one hand, within a social campaign advocating the NHS.

1.1.2 *Sanctity*

The frequent association between nurses and religious icons in popular imagery, and consequently films, is not accidental. Going back in time, the two figures often overlapped. As Sioban Nelson (2001) stresses: “the vocational origin of respectable nursing is historical [...] it cannot be escaped” (p. 1). Moreover, even before Nightingale founded the Nightingale Training School at St. Thomas's Hospital (1860), religious nursing's skills were highly esteemed. In the early and mid-19th century, when discontent about healthcare was widespread since “anybody could freely describe themselves as 'a nurse' and call what they did 'nursing'”, Robert Dingwall, Anne Marie Rafferty and Charles Webster (1988: 4) argue: “the model of sisterhoods did make an important contribution” to the professional category's “reconceptualization” (p. 29). Similarly, Nelson (2001), remarks: “religious nursing is argued to have been formative of professional

nursing” (p. 1); and Lesley A. Hall (1997) affirms: “there was a strong relationship between such [nurses'] endeavours and religious enthusiasm” (p. 263). One further clue in this respect is Nightingale's humanitarian mission during the Crimean War. Historical sources attest that 38 women were initially engaged in the expedition, including both lay and religious. In particular, 13 of these were nuns – 8 sisters from two High Anglican orders, and 5 from two Catholic convents – and 20 were lay nurses – 6 from St John's House, and 14 hospital nurses (Summers 1988: 38).

The cinematic characterisation of nurses as quasi-religious individuals may therefore in large part depend on the original connection between the two figures. Interestingly, this representational trend affected nursing mostly during the first half of the 20th century. Several scholars confirm this tendency, from the Kalischs (1982, 1987), Julia Hallam (2000, 2005), and David Stanley (2008), to Alan Cunningham (1999), Carrie Farella (2001), Terry Ferns and Irena Chojnacka (2005), and Barbara Eisner Bayer (2007). In particular, Hallam (2005) identifies such representation's peak between the 1920s and the 1940s:

In the 1920s nursing often figures as a redemptive identity
[...] Between the two World Wars images of nurses as
ministering angels dominated all forms of popular
representation of the profession, an image centred on the
traditional nurses' uniform with its connotations of
religious sisterhoods and the 'closed orders' of nursing life
(p. 105).

As Hallam underlines, besides the originally widespread sisters' participation in the profession, other aspects may have contributed to the association between nuns and nurses. One is the common vocation of both categories, definable in terms of charity and altruism, rigour and discipline. The other aspect refers to the nursing uniform's style and its perception in collective imagery. Especially in its earliest incarnations, nurses' distinctive clothing was reminiscent of that of nuns. Lynn Houweling (2004) argues:

[Nightingale's] uniform for nurses in the Crimean War projected soberness and respectability. Modest [...] the grey tweed dress had long sleeves and long, full skirts. It was paired with a matching wool jacket, a cape (which some claimed was designed to "hide the body"), and a brown scarf [...] And, of course, there was the [...] plain white cap (p. 41).

The dress thus described brings to mind images of religious vestments: chaste and rigorous in shape, plain coloured, and including headgear. Since Charles Dickens's Sairey Gamp, the nurse in *Martin Chuzzlewit* (1844), who "wore a very rusty black gown, rather the worse for snuff, and a shawl and bonnet [...] dilapidated articles of dress" (p. 339), the nursing uniform has evolved. Yet, soberness has remained a distinctive feature of the profession's clothing. Jane Brooks and Rafferty (2007) confirm this: while "it is difficult to argue against the

importance placed on dress and fashion in Victorian society”, where frivolousness overall dominated women's clothing, Nightingale demanded that the probationers' outfit at St Thomas's Hospital presented “no crinolines, polonaises, hair-pads, & c.” (pp. 43-4).

The documentary footage of Cavell's re-internment (Norwich, 15 May 1919) offers further evidence of nurses' austere outfits. The record shows Cavell's memorial parade, in which both nurses and nuns participated. Although the women were divided into different groups according to the profession, at first sight the two categories are hardly distinguishable, due to their strong bearing and because of their similar gowns.

The connection between nursing and religion also underlines the deep-rooted association of nurses with the idea of “respectable” white middle-class femininity discussed above. In western culture, (patriarchal) discourse addressed to female audiences has assigned to middle-class women ethical and moral virtues, to be deployed in the domestic sphere (Brown & Jordanova 1981). Sometimes, this is referred to as “woman’s mission”, for women were expected to exert their moral influence on family and friends, and to dedicate their spare time to communities committed to social/moral improvement, as a charitable act. Scholars including Linda Nead (1988) and Julia Hallam (2000) have identified contradictions in the “woman’s mission” phrase, stressing the latter rather “helped to regulate the distance between women of different social classes” (p. 15). In this regard, Nead (1988) examines how the “woman’s mission” was used to designate the role of the higher classes’ women as redeemers of – and, thus, juxtaposed to – “the fallen” – either prostitutes or women of questionable morality – and how the

woman's mission distinguished between "deserving" and "undeserving" poor (pp. 196-7).

Besides class, hierarchical distinctions also marked white women's approach to non-white ones. Dealing with the history of racism in 19th century imperialist Britain, Ware (1992) notes that "white middle-class women" displayed a similarly pitiful behaviour towards "the enslaved" – "a more abstract group of poor with whom" white women "had little physical contact" (Hallam, 2000: 15). Such classist and racist dynamics become more intelligible if one considers what 19th century Britain meant by "respectability". Discussing the concept, Skeggs (1997) stresses: "the categories of White middle-class womanhood were constructed against those of potentially dangerous Black women" (p. 99). Moreover, referring to Sander Gilman (1992), Skeggs also remarks that class discriminations complemented racial ones since, ultimately, "working-class women – both Black and White – were coded as the sexual and deviant other against which femininity was defined" (p. 99).

Emblematic of this racist and classist mentality in 19th century Britain is the Ladies Association for the Diffusion of Sanitary Knowledge. In the name of evangelicalism, this group of upper/middle-class women would "visit the houses of the poor in an attempt to redeem them from themselves, that is from themselves as a sign of dangerous, disruptive sexual women" (Skeggs 1997: 99). This conflation of (white) race, (upper/middle) class and (Christian) religion as a means to respectability and even redemption (and, significantly here, within a sanitary context) is not surprising. In *White* (1997), Richard Dyer explains how race and class polarities intersect with Christianity. The latter, Dyer argues, has

indeed promoted “the culture of light”, in which whiteness “does carry the more explicit symbolic sense of moral and also aesthetic superiority [...] with its emphasis on purity, cleanliness, virginity”, continuing: “white is the colour of “virtue [...] of goodness [...] [of] all of the moral connotations [...] spirituality, transcendence [...] simplicity” – in neat contrast to “non-whiteness”; notably, “the Virgin Mary is the supreme exemplar of this feminine whiteness” (pp. 70-4).

Nursing is profoundly inscribed within such fundamental aspects of western thought: the profession is historically embedded in 19th century Britain, which embraced such principles. Hence, the hegemony of the “nurse/white-middle-class woman” parallel underlying recruitment campaigns during colonialism; but also the profession’s strict connection with the Christian “culture of light” – enhancing the “whiteness” of the ideal nurse’s skin and gown as metaphors for purity, as well as endorsing caring as a form of morally laudable mission.

The account above has illustrated, also from a cultural viewpoint, how nursing can be said to intersect with Christianity – a topic chapter two discusses. This further sustains the visual association of Wilcox’s Cavell and Nightingale with “saintly” icons, which this section describes through three images: “the fervent faithful”, “the angel of mercy” and “the Madonna”. Referring to both films’ most symbolically meaningful scenes, I shall examine each of these images in detail, and discuss them in light of Britain’s national and nursing history.

Fervent Faithful

The “fervent faithful” is a recurrent characterisation of Wilcox's nurses: their deep devotion to God emerges several times in *Nurse Edith Cavell* and *The*

Lady with a Lamp. The clear connection between this image and the religious sphere enables the fervent faithful to be counted among what I define here as icons of sanctity.

Both Cavell's and Nightingale's biographies provide interesting details about their actual religious experiences. Cavell grew up in an observant Anglican family. Her father was the vicar of Swardeston in Norfolk, her birthplace. According to Ernest Protheroe (1916), Cavell's "father's precept and example" were not only at the core of her "innate gentleness" and "sense of duty" as a child (p. 8) but, as Pickles (2007) stresses, were also "significant in moulding her adult character" with "a strong sense of Christian charity" (p. 92). Nightingale's views on God and the meaning of life emerge from her letters, scholars like Reverend Tom Keighley (2010) argue. Keighley affirms that Nightingale believed "in a deeply rational God" and conceived her existence as a way to achieve "atonement for the ills of the world". Accordingly, for her "the more the laws of the universe were understood, the easier achieving that at-one-ment would be". This knowledge broadens the traditional understanding of Nightingale's spirituality, which the mystical/mythical event determining her vocation to nursing – her call from God – has mainly defined. Lytton Strachey's *Eminent Victorians* (1918) describes the episode, which led Nightingale "certainly towards something very different from anything around her" (p. 68), since God chose her as the protagonist of such a noble mission:

God's calls are many, and they are strange [...] What was
that secret voice in her ear, if it was not a call? [...] Why

was even her vision of heaven itself filled with suffering patients to whom she was being useful? So she dreamed and wondered, and, taking out her diary, she poured into it the agitations of her soul (p. 68).

Strachey's description of Nightingale's divine election undoubtedly confers great value on her, as she experienced a dimension that usually characterises the life of saints.

Besides the authoritativeness of historical chronicles and biographies, less scholarly sources also document the two nurses' religious faith. For instance, Neagle's autobiography (1974) refers more than once to the topic. During her preliminary studies of both nurse-characters, Neagle benefitted both from the testimonies of people who had personally known Cavell and Nightingale, and from the nurses' personal belongings. Neagle was given Cavell's copy of St Thomas a Kempis's *Imitation of Christ*, "in which she marked certain passages of key importance to her" (p. 116). As for Nightingale, Neagle reports:

Books written during her lifetime gave me little help, but this personal contact was inspirational and it became increasingly evident that the most immediately striking characteristic of Miss Nightingale was a deep religious belief that God had called upon her to dedicate her life to others and she was prepared to accept this responsibility (p. 178).

Wilcox's biopics mirror Cavell's and Nightingale's faith. In *Nurse Edith Cavell*, two moments, especially, represent Cavell's religious devotion: when she starts realising her mission's dangerous character, and before her execution. The first scene shows Cavell lying on her bed, in the intimacy of her room. Her expressions and gestures reveal her bewilderment: she is at the frame's centre, wearing a white nightdress that matches her bed linens, and a bright light illuminates her face, especially. Initially, her face is turned towards the camera: her eyes are wide open, yet vacant (figure 1.12). Suddenly, she turns her head and looks at the ceiling, then puts one hand on her forehead, in a state of anguish (figure 1.13).



Figure 1.12



Figure 1.13

At this point, the director moves in on Cavell, who meanwhile has read an encouraging passage from her Psalms Book, a sign of God's approval of her assignment. Following this epiphany, Cavell's expression changes, appearing less strained: the close-up on her highlights this (figure 1.15). Before picking up the book, a candle on her bedside table had captured her gaze (figure 1.14), enhancing

the scene's overall symbolism: candles traditionally indicate God's presence among his followers (Jenner, 1910: 17-8).



Figure 1.14



Figure 1.15

The two scenes that depict the hours preceding Cavell's death – the first describing the official announcement of her execution, the second portraying her meeting with the prison chaplain – offer further examples of Cavell's faith. Both depictions are highly iconic. In the first, human frailty momentarily overwhelms Cavell: she is alone in her cell, crying, until she kneels before the crucifix and finds comfort in prayer (figure 1.16). The image is reminiscent of traditional representations of saints, an idea the shot's peculiar lighting reinforces: a beam diagonally crosses the scene, illuminating just Cavell and the crucifix on the wall.



Figure 1.16



Figure 1.17

The use of lighting is equally evocative in the second scene in question, portraying Cavell's last communion (figure 1.17). She is with the military priest: they face each other and pray, on their knees, their hands joined. Three beams illuminate the image in a triangular formation: two originate from Cavell's hands and expand towards the frame's borders, while the third comes from the frame's top, bearing down towards the altar. This effect, besides emphasising the rite's profound spirituality, carries a highly symbolic value. The number three is a religious metaphor for the Holy Trinity of Father, Son and Holy Spirit. The latter, in the Catholic tradition, is one of the entities enabling transubstantiation, which is "the change of the whole substance of bread into the substance of the Body of Christ and of the whole substance of wine into the substance of his Blood" (Roman Catholic Church 2005). Wilcox's own faith may here justify the iconic reference to this principle: Jeffrey Richards (2004) states Wilcox "was a Roman Catholic and intensely proud of his background".

The attitude towards prayer also distinguishes Nightingale in *The Lady with a Lamp*. This emerges twice in the film and, interestingly, always for reasons related to nursing. The first example takes place in the period preceding the mission in Scutari, in the aftermath of a formal dinner at the Nightingales'. At that point, nobody but the Minister of War, Sydney Herbert, sympathises with Nightingale's professional aspirations: the assembled guests deem nursing inappropriate for a respectable lady. Nightingale is then depicted in her bedroom as prey to discouragement: she gives voice to her conscience, even addressing her

owl; and her expression is one of deep inner turmoil. Wilcox shoots this in close-up, highlighting the struggle with her spiritual torment (figure 1.18).



Figure 1.18



Figure 1.19

Subsequently, Nightingale starts walking towards her bed, moving away from the camera, the latter remaining fixed. When she eventually stops, the camera frames her entire profile from the back: she invokes God's help, passionately, her face lifted towards the ceiling and her hands joined (figure 1.19). This framing is highly iconic: again, it reminds us of popular images of saints appealing to God.

The second portrayal of Wilcox's Nightingale in prayer is set at the Barrack Hospital in Scutari, where she has to face numerous difficulties, on both a human and sanitary level. The scene illustrates the aftermath of the heated discussion between Nightingale and Sister Wheeler (analysed in the previous section): despair and frustration, due to the marginalisation of nursing from the Army's hierarchy and routine, overwhelm Wheeler. Following the two nurses' fraught and

emotional dialogue⁶, Nightingale appears very thoughtful, sharing Wheeler's sense of intense frustration, but keeping her emotions in check. Nightingale then stands in the frame's foreground, with her assistant compassionately observing her in the background (figure 1.20).



Figure 1.20



Figure 1.21

Nightingale's expression is eloquent: her eyes, lost, mirror her soul's struggle. Her pose also accords with her troubled condition: her hands placed firmly on the desk in front of her confer a general sense of physical tension to her profile. Suddenly, Nightingale turns her face towards the window, as the light coming from outside the room captures her attention. In a state of quasi-ecstasy, she heads for the brightness: the camera follows her movements, at a constant distance from her, which accentuates her sense of agitation. Once she has reached the window, she genuflects and starts praying (figure 1.21): only at this point does she appear calm. Her body also reflects this, being composed and no longer strained. Moreover, a sunbeam from outside illuminates her figure, further magnifying the relief she experiences in her relation with God.

⁶ For a more detailed account on the scene, *see* paragraph 1.1.

From the analysis of Wilcox's Cavell and Nightingale as emblematic of the “fervent faithful” some traits emerge as recurrent. On a narrative level, both nurses’ mystical experience follows a moment of epiphany, which inspires them to finding comfort in God and prayer to face their challenges. This attitude overall complies with the two nurses’ traditional representation. Pickles (2007) stresses that among Cavell's most immediate representations is her being a “martyr” and “Christian” (p. 86). Likewise, the symbolic value of Nightingale’s call from God as a nurse contributed to imbue her figure with religious-related ideals. A passage from Willis John Abbot's *Notable Women in History* (1913), referring to Nightingale's experience in Scutari, confirms this. As the text echoes Nightingale’s depiction as an “angel of mercy”, the image I discuss in the next section, I shall quote it at length:

Though she herself was seized with the fever that she fought for her patients, she refused to give up her work [...] To the men she was a true angel of light. “We call her 'the angel'”, one wrote in a letter home. “Could bad men be bad in the presence of an 'angel'?”. And another not quite so refined in expressions, wrote, “Before she came there was such cussin' and swearing as you never heard; but after she came it was as holy as a church” (p. 292).

Here, Nightingale’s association with the religious sphere emerges from the type of vocabulary employed (i.e. qualifiers like “holy”), from the reference to

church's images, and from her identification with an "angel".

In Wilcox's representation of Cavell's and Nightingale's relationship with God, lighting – a metaphor for God's presence – plays a crucial role, usually either surrounding or attracting the two nurses. The next section foregrounds lighting's prominent role also in the characterisations of Wilcox's protagonists as the "angel of mercy" and the "Madonna".

The angel of mercy and Madonna

The angel of mercy's stereotype is one of the most acclaimed in terms of female nurses' media representation. Critics – including the Kalischs (1982, 1987), Julia Hallam (2000, 2005) and David Stanley (2008) – foreground angel-likeness among the profession's core values within social imagery. It is noteworthy that, against tradition, the nurse thereby turns the angel's theoretically "neutral" gender into female. We saw one reason for linking nurses and spiritual images is the profession's religious origin. The nature of the nursing profession is another reason: nurses easily evoke the idea of motherhood and its traditional feminine connotations, by caring for people who are in need, and often unable to be self-sufficient.

The parallel nurse/angel has recurred since the profession's earliest portrayals, whatever their geographical provenance. From the Crimean War onwards, the "angel of mercy" expression has often defined Nightingale. Abbot (1913), for example, describes her as "the English soldiers' angel of mercy" (p. 289). Apparently, the initial reason for this epithet was utilitarian: Francis Berrymore Smith (1982) says its aim was to contrast British people's

disgruntlement with the consequences of the war in Crimea, by promoting a reassuring and praiseworthy image. I should mention that a similar meaning originally attached to Nightingale's definition as "the lady with a lamp". Julia Hallam (2000) argues the icon was initially inscribed within the rhetoric of a discourse aimed, amongst others, at nursing recruitment, and advocating feminine ideals through acclaimed Victorian images, i.e. the "middle-class mother" and "the angel in the house" (p. 10). The nurse's image as a female, angelic individual has therefore defined the profession since Nightingale's day.

The nurse/angel pair has continued to distinguish the profession in film too, notwithstanding national boundaries. Recent filmic representations of this type include, for example, Joe Wright's *Atonement* (UK, 2007) and Rose Bosch's *La Rafle/The Round Up* (FR, 2010). In view of the 1950s-1990s tendency in films to portray nurses as sexual icons, grotesque battleaxes or dark omens, the renewed emphasis on the "nurse angel" is significant: it may be symptomatic of a gradual return to earlier, more celebratory and reassuring images of the category, of which the "angel of mercy" is a typical example.

This section aims at describing how *Nurse Edith Cavell* and *The Lady with a Lamp* convey the idea of angel-likeness. This depiction – recurrent in both films – is in line with the biopic's celebratory nature and is an effective and expedient way to draw a professional and comforting profile.

It may be worth introducing here also a salient point of paragraph 1.3 below: Nightingale's identification with the battleaxe, a symbol at first sight antithetical to the angel. However, Hallam (2000) stresses, in Nightingale the two images "are not necessarily diametrically opposed" (p. 10), with the issue of

colonialism key to this apparent paradox. Describing Nightingale's scheme for a nursing home, Poovey (1988) argues: “the crusade that Nightingale originated in this autonomous, middle-class female home was explicitly colonial” insofar as “its aim was to 'reform and recreate [...] the homes of the sick poor' in its own image”; and continues, “as monitor of the poor family's home environment, the nurse therefore becomes a public agent of moral reform” and “deploys the cultural authority granted to (middle-class) women in the service of the reform middle-class men also wanted to effect”. Hence, Poovey concludes that Nightingale’s “war [...] was also a domestic war against medical men”, aimed at “the nurse's gradual usurpation of the doctor's authority” (pp. 191-2).

Poovey's account highlights how, in Nightingale, the Victorian feminine ideal of the merciful angel image merges with a commanding and somewhat subversive component, engendered by her being an ambitious reform agent. This is what makes Nightingale akin to the “battleaxe” without the negative connotations of the term. Wilcox's films reflect this two-sided image of Nightingale – and, to some extent, Cavell. While the angel of mercy evokes religious (and evidently patriarchal) ideals of pure womanliness and caring, the battleaxe advocates the “unfeminine” values of strength, courage and combativeness. Both images are integral to Wilcox's nurses' overall profile.

The first example of the angel-like figure I will examine is from *Nurse Edith Cavell*. In particular, I refer to a scene that portrays Cavell attending a sick German soldier in the presence of his superior. Initially, the camera frames all three characters (figure 1.22): on the left hand side is the senior officer who, shot from behind, explains to Cavell what afflicts the young man; in the middle, the

suffering boy and, on the right hand side, Cavell, who is opposite the camera and whose hands are gripping those of the patient.



Figure 1.22



Figure 1.23

Cavell's tender act is the prelude to an even more touching image, revealing her authentically angelic behaviour towards the soldier. The camera cuts to move in on the couple (figure 1.23). Cavell sits close to the soldier, who is in bed showing signs of incipient delirium, in the frame's lower foreground. She tries to calm him down, in a maternal, reassuring manner, by keeping one hand on his and putting the other on his forehead. Before the sequence ends, the camera cuts again, several times, by alternating shots of the two characters from different perspectives (figures 1.24 and 1.25). The images focused on the soldier highlight his suffering, mirrored in his strained facial expression (figure 1.24); those centred on Cavell (figure 1.25) exalt her tender assistance, particularly reflected in her maternal and concerned expression as well as in her protective pose. These *mise-en-scène* choices emphasise Cavell's compassionate involvement and, accordingly, also enhance her representation as an angel of mercy.



Figure 1.24



Figure 1.25

The Lady with a Lamp shows several examples of angel-likeness, too. One refers to a topical sequence in the film: Nightingale's first portrayal as “the lady with a lamp”. The scene begins with an overview of sick soldiers who, side-by-side, lie in their beds, and whom Nightingale supervises (figure 1.26). The camera frames each of them quickly, and then stops to focus on the last of the group, whom Nightingale eventually joins. She is close to this man, on her knees, and lovingly starts wiping his brow, bathed in perspiration (figure 1.27).



Figure 1.26



Figure 1.27

At this point, the camera comes gradually closer to the couple (figure 1.28). Besides enhancing Nightingale's angel-likeness, framing and dialogue are key to

understanding the sequence's significance within the plot. Nightingale knows the patient in question, as he is the gardener of her family's estate, whose mother she nursed back to health in an earlier part of the film. As the images below attest, she shows humanity as well as a deep and abiding affection for her charge, and this clearly connotes a merciful angel's attitude. After a maternal caress on the young man's forehead (figure 1.29), she holds his hands in hers (figure 1.30).



Figure 1.28



Figure 1.29

The two stare at each other and talk, showing their profiles to the camera. Nightingale reveals deep emotional involvement towards the patient who, in fact, is about to die. When he eventually passes away, Nightingale cannot do anything but kiss his brow (figure 1.31) and then turn her shocked face towards the camera.



Figure 1.30



Figure 1.31

As we saw, the idea of the nurse as an “angel” is deep-rooted in popular culture and imagery. Smith’s 1992 study of nursing’s emotional labour offers further evidence of the enduring nature of the nurse-angel pairing: the patients Smith interviewed pinpointed “angel, beautiful and Florence Nightingale” as the nurse’s most recurrent stereotypes, and defined nursing as an inborn vocation, unmotivated by financial reward. The same views were echoed in 1980s and 1990s recruitment posters Smith scrutinised (p. 30). However, while “model nurses” like Nightingale and Cavell suited the ideals in question – which the case studies in this chapter confirm – the student nurses Smith interviewed resented them: “patients call you an angel. I tell them I’m doing it not to go to heaven but as a job” (p. 31).

What emerges from both the scenes examined above and Smith’s study is the crucial role of emotions in the nursing profession, one that feminist work on affect can help us understand further, both in terms of their management and representation. Smith argues that, as a “caring profession”, nursing is strongly involved with emotions: “caring” is “the emotional side of nursing [...] more than just part of the package” (p. 18) – and she underlines the head nurse’s importance in rendering emotional care apparent and valued to nurses and patients. She stresses that caring “does not come naturally” but needs to be managed (pp. 135-6): nurses thereby have “to work emotionally on themselves (undertake emotional labour)” in order to care for patients, which “requires specialist learning to produce in others a sense of feeling cared for in a safe place” (p. 18). Smith finds

this scenario fits Arlie Hochschild's (1983) definition of "emotional labour": nursing care is a type of emotional labour insofar as it is work ("carework") that has to be "recognised and valued" as well as "supported educationally and organisationally in the institutions where nurses work" (Smith 1992: 136). Smith concludes: "emotional labour does make a difference and care matters to patients", adding, "the skill lies in the nurse who is able to recognise that emotional labour is needed and may be required in different forms for different patients". Thus, "technical" nursing skills have to be complemented by "the little things" or "gestures of caring" (p. 145).

In terms of the representation of affect, Wilcox's Cavell and Nightingale magnify the "model nurse's" skills and values. Eloquent expressions and gestures by the actress convey the idea of care, which effective framing (and lighting) further enhance, as well as the star's glamorous good looks. The effect is an amplification of the nurses' behaviour and emotions, elevating Wilcox's Cavell and Nightingale to the highest level of angel-likeness displayed in the films I analyse. In "After Affect" (2010), Anna Gibbs discusses the representation of affect through the concept of "mimesis" and performance, defined as "the corporeally based forms of imitation, both voluntary and involuntary", which "involve the visceral level of affect contagion, the synchrony of facial expressions, vocalizations, postures and movements with those of another person", thereby "producing a tendency for those involved to converge emotionally". Representation, Gibbs remarks, relies on this mimetic communication (p. 186). The nurses' overwhelmingly positive profiles draws on the merging of skills and care – which highly coded expressions and gestures

emphasise through *mise-en-scène* and cinematography, too – resulting in the depiction of “stoic emotional labour”. This may explain why these biopics, enhancing the emotional affect of nursing work, turned out to be more captivating than films explicitly aimed at recruiting young women who intended to undertake a nursing career (Hallam 2000: 41-2).

Another reason for the biopics’ success is that Cavell’s and Nightingale’s characterisation as stoic emotional labourers stressed their professional authority and, thus, instilled in the audience a sense of reassurance. As potential patients, at once aware and fearful of their own vulnerability and impotence when facing disease, the films’ viewers long to see images exalting the nurse’s healing virtues: the latter respond to the sick patient’s need to entrust someone else’s care and authoritativeness. Although Hallam (1998) applies this argument to a different subject (the doctor) and genre (the TV medical melodrama), the affirmative depiction of Wilcox’s nurses aptly fits her analysis. She indeed foregrounds: “in the 1950s” melodramatic physicians showed a “saintly demeanour, high moral character, and good looks”, which find “analogies in popular fiction of doctors as god-like [...] to personify medicine’s professional ideal” (pp. 26-7) – a description clearly echoing my own account of Cavell and Nightingale. Thus, the display of “saintly” and “moral” virtues concurs to forging the idea of professional authority – my focus in section 1.1.3 – in the audience’s reception of medical characters: Wilcox’s Cavell and Nightingale are paradigmatic examples.

Wilcox’s biopics convey Cavell’s and Nightingale’s heavenly nature also through their representation as Madonnas. This characterisation’s peculiarity lies in its strong visual identity: an effective use of lighting and white clothing

enhance the idea of immaculateness, while Neagle's performance and Wilcox's framing express the protagonists' saintly demeanour. These factors' combination renders such shots – usually, extreme close-ups – reminiscent of traditional Marian images, which frame the nurses in emblematic scenes. A plausible reason for these shots is, again, the biopic's aim: celebrating its protagonists' excellence.

The sequence featuring a German officer shadowing Cavell is significant in this respect, both in terms of narrative and iconography. The pursuit ends when the officer enters the operating theatre of Brussels's Berkendael Medical Institute, where Cavell is treating a British soldier incognito. The camera shoots this tense encounter effectively, by cutting repeatedly and then moving in on each of the two characters. The resultant close-ups are crucial for the scene's pathos, as they convey the drama through the protagonists' expressiveness. It is therefore interesting to look at Cavell's portrayal in more detail (figure 1.32).



Figure 1.32

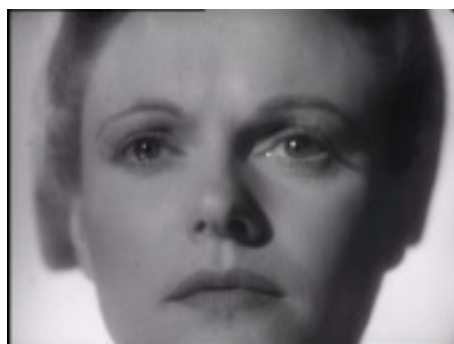


Figure 1.33

The first element to point out is clothing: for the first time in the film, Cavell wears a white uniform, which contributes to her immaculate effect. Lighting is also pivotal. Cavell's white garments and the bright light illuminating

her forehead set off her visage. Completing this celestial portrait is her gaze, the frame's real focus, whose expressiveness communicates a sense of both austerity and dignity, and confers a somehow mystical aura on Cavell.

A similar and even brighter depiction of Cavell as a Madonna characterises the film's last scenes (figure 1.33), as the same image recurs twice: before Cavell's shooting, and during the flash-forward to her Memorial Service at Westminster Abbey (1919). This repetition is itself meaningful as, on a symbolic level, it recalls the idea of the Virgin's Assumption. Cinematically, the passage to the heavenly dimension is incisively represented. Shortly before the execution, the camera focuses on Cavell by showing a brick wall in the background. Gradually, this element disappears as the scene becomes increasingly luminous. Simultaneously, the director moves in on Cavell, until her face becomes the only object in the frame. The highest level of brightness marks the final scene, where the same images are presented in an almost transparent version and superimposed on the church's altar, where Cavell's coffin lies.

These extreme close-ups enable the public to appreciate Cavell's Madonna-like nature. Again, the spectator's attention is captured by her look – deep, placid and solemn. Interestingly too, in both shots Cavell never looks straight at the camera: her gaze is raised as if it was attracted by a vision of God. This confers on her a Virgin-like resemblance.

Wilcox's *Nightingale* is reminiscent of Marian images, too. Particularly representative is *The Lady with a Lamp*'s final scene, which I examined in the

previous section.⁷ The shot in question is a close-up of Nightingale (figure 1.34) with distinctive Madonna-like traits as outlined. The overall image is bright, a luminous aura surrounding Nightingale and suggesting a quasi-celestial aspect. Nightingale's clothing further emphasises this effect: she wears light-coloured garments; a white veil, covering her head, frames and highlights her face, which a light beam also partly illuminates. Noticeably, Nightingale does not look at the camera: yet, unlike Cavell's, Nightingale's eyes are lowered, and look towards an indefinite point. This bearing evokes a sense of demureness – a distinctive trait of Britishness, as we saw, as well as of the Virgin's traditional images (figure 1.35).



Figure 1.34



Figure 1.35

Amongst the icons presented in this section, the Madonna is considered the most praiseworthy, as it symbolically raises both nurses to the highest level of sanctity.

Overall, Cavell's and Nightingale's portrayals as icons of sanctity are exemplary of the biopics' whole corpus on nursing: indeed, saintly traits mark

⁷ For a more detailed account on the scene, *see* paragraph 1.1.

biographical nurses also in earlier productions. An example is Dieterle's *The White Angel* (US, 1936), where maternal care and heavenly nature distinguish Nightingale's depiction. In this film, too, Nightingale is often shown in close-ups (the production's distinctive shot), supporting her association to an angel – in line with the title – or a Madonna. This idea also marks one of the film's most famous close-ups, which appears in its original trailer and, in the form of a drawing, in its poster. Nightingale (here, Kay Francis) wears a white veil, framing her entire figure except her face and dark hair immediately above her forehead. This clear clothing exalts her darker facial features by contrast, and gives prominence to her slightly asymmetrical eyes, vaguely downcast. Her countenance is relaxed and these traits' combination communicates a sense of peacefulness, further enhancing her angelic nature.

Religiosity is, also, a paramount trait in two films about Cavell: Morgan's *Nurse and Martyr* (UK, 1915), and Kinsella and Morgan's *Stand by the Men Who Have Stood by You* (UK, 1917). Usually defined as a “cartoon newsreel”, *Stand by the Men Who Have Stood by You* is a short propaganda film, only 5 minutes long, which the National War Savings Committee sponsored to raise financial support for the British Army in WW1. Besides British soldiers and “Britannia” – a clear embodiment of patriotic ideals – a core character in the film is, unsurprisingly, British national heroine Cavell, the focus of at least half of the short.

The sequence on Cavell illustrates her life's tragic epilogue, and opens with a group of armed military men marching, whom a woman follows: Cavell. Her identity is revealed only when she becomes the scene's focus, and the spectators can catch a glimpse of the Red Cross symbol on her uniform. Cavell is portrayed

as a graceful and dignified person, wearing a white veil and exhibiting submissive behaviour. A close-up highlights her gaze, revealing her core feelings: her eyes are despairing, initially fixed and then slowly raised to the sky in prayer. The actress's emphasised facial expressions and bodily gestures confer on the scene a highly emotional charge, and effectively convey Cavell's distinctive spirituality. Curiously, in that film Cavell's execution is not enacted: the final shot only shows her wounded body lying on the ground – an image helping, however, towards Cavell's association with martyrdom.

As I show in the next section, Britishness and exemplary, quasi-religious, moral integrity complements and completes their professional authority, the last key feature of their celebratory and reassuring depiction.

1.1.3 *Professional authority*

Cavell's and Nightingale's final defining value in Wilcox's biopics is professional authority. This aspect, which is essential to a model nurse, can be also understood in these two nurses as both a product of their distinctive "Britishness" and "sanctity", and a feature that mediates between them. Indeed, while displaying "saintly" compassion through stoic emotional labour, the representation of Cavell and Nightingale's professional authority also strongly relies on typically British traits, such as "reserve" and "self-control" – here definable in the more general terms of "social distance". This set of features result in the two nurses' capacity of self-regulating their emotions, by showing affirmative detachment and firmness – crucial elements to the "proper" exercise of nursing, as we previously saw.

Cavell and Nightingale's professional authority also illuminates by contrast with previous representations of nurses the innovative character of these two nurses and, by extension, the innovative character of the films they feature in. According to David Stanley (2008), from 1920 to 1955, nurses were mainly featured in "romance/love" plots, with "romance and war [...] or romance and the conflict between the nurse and her call to duty" the motives "most commonly" deployed (pp. 90-1). Prior to Stanley, Julia Hallam (2005) made similar points, stressing that also in the films where love and profession co-featured, the nurse's "dedication to duty" was generally "rewarded by romance with a handsome male doctor" (pp. 106-7).

Evidently, the scenario above does not apply to Wilcox's Cavell and Nightingale, whose approach to men is overall definable in terms of affirmative distance, with maternal caring their most "emotional" trait. Hallam, too, acknowledged the uniqueness of biographical Nightingale and Cavell as nurse-characters, arguing that the overall lack of career-oriented nurses in pre-WW2 films found an exception in the "biopics of famous nurses such as Florence Nightingale and Edith Cavell" (p. 107). This not only confirms these two characters' specificity as screen nurses but, more generally, also their unconventional nature as working women – in whose (patriarchally inflected) representation, as explained in the introduction, romantic/sexual traits tend to be prominent.

History, too, confirms Cavell's and Nightingale's professional authority, by highlighting their contribution to the development of nursing and, by extension, to women's social progress. Dealing with the ideological impact both nurses had in

late 19th and early 20th century societies, Diana Souhami's *Edith Cavell* (2010), a biography of Cavell where the reference to Nightingale's life and contribution to nursing is inevitably recurrent, offers a useful starting point. When Cavell was born, in 1865, almost a decade had passed since the Crimean War's end. But although Nightingale had already published her famous *Notes on Nursing* (1859), the era still devalued girls; as Souhami says: "though the birth of a healthy daughter was cause for thanksgiving" it was sons "who continued the family name, sat at the head of table, wrote the sermons, were lawmakers, soldiers, politicians, doctors" (p. 5). By contrast, British women had "no vote, no public voice; their place was in the home" (p. 6). A notable exception was Queen Victoria, who reigned over the UK from 1837 to 1901. However, the female monarch's presence was conceived as "an oddity of primogeniture", and her role as a queen acknowledged as "divine right" (p. 6). In this patriarchal context, figures like Cavell, as well as Nightingale and Elizabeth Garrett Anderson (1836-1917), the first female doctor in the country, must therefore be understood as revolutionary.

Male medical students at the Middlesex Hospital, where Garrett Anderson attempted to do her training, complained about her presence; and the successful completion of her course of study prompted the Society of Apothecaries to change the rules regulating students' examinations "to prevent other women getting" Garrett Anderson's "same idea" (Souhami 2010: 6). In response, Garrett Anderson – who was also a suffragette – established her own clinic for women.

Garrett Anderson's experience and contribution to women's progress draws attention to Nightingale's and Cavell's influential role in terms of women's social

re-conceptualisation. Nightingale was amongst the muses of “the founder of modern feminist literary criticism”, Virginia Woolf (Goldman, 2007: 66). In her feminist manifesto, *A Room of One's Own* (1929), Woolf deals with “the history of men's opposition to women's emancipation”, commenting: “Among your grandmothers and great-grandmothers there were many that wept their eyes out”, referring to “Florence Nightingale” as the one who “shrieked aloud in her agony”. Although Mark Bostridge (2008), a biographer of Nightingale, sees in the quoted sentence a criticism of Nightingale's writing style (*See also*: Wilson 2008), I believe Woolf's commentary praised Nightingale's courage and determination, thereby encouraging young women to follow her example.

Cavell has been a model for feminists, too. By virtue of her story, she came to embody the suffragettes' ideals of womanhood. The literature on Emmeline Pankhurst, the founder of the Women's Franchise League (1889), who also cooperated the establishment of the Women's Social and Political Union (1903), is illuminating in this sense. Pankhurst's idea of gender equality during WW1 was that of a global, “men's and women's contribution to the war”, implying the achievement of “women's right to war service” (Purvis 2003: 269). In this light, Cavell not only equated but, rather, outdid her male counterparts, as British Prime Minister Herbert Asquith remarked in his 1915 speech in the House of Commons:

She has taught the bravest men among us the supreme lesson of courage [...] We have great traditions, but a nation cannot exist by traditions alone. Thank God we have living examples of all the qualities which have built

up and sustained our Empire. Let us be worthy of them

(quoted in Pickles 2007: 87).

The examples above offer evidence of the impact both nurses' professional vocation had on society, justifying their unusually affirmative portrayal in films. The symbolic charge that has been assigned to these women over time is a further crucial point to my analysis: reality and myth seem to have equal relevance in their profiles' construction. Cavell, Pickles (2007) stresses, "only became posthumously famous as a result of her execution" (p. 9): the martyrdom concept therefore is key to her figure. Yet, Pickles also remarks: among the "immediate representations of Cavell" is not only "the martyr". She was indeed also a "nurse, [...] patriot, soldier, Christian, exemplary British woman and citizen" (p. 86).

Similarly, Nightingale was given the highest endorsements. Bostridge (2008) underlines: she "became the recipient of honours, including the Order of Merit", and even deserved "the offer of a national funeral and burial in Westminster". Besides, "until recently [...] she was the only woman whose image had adorned the Bank of England's paper currency" (pp. xx-i). These acknowledgments found apt counterparts in Nightingale's symbolic representations: her embodiment of contrasting images helps towards her identification with what may be defined as "the perfect professional". Julia Hallam (2000) stresses:

The mythologisation of Nightingale, both in her own time and subsequently, has led to her image sustaining what are

now seen as apparently conflicting images of nursing. Nightingale is known as the self-sacrificing angel, the lady with the lamp, as well as the efficient administrator and leader. She is both the tender, compassionate, bedside nurse dedicated to the physical and psychological welfare of her patients, and the 'battleaxe', the tough, determined head nurse who creates order out of chaos and runs her unit with military efficiency (pp. 19-20).

While Asquith's portrayal of Nightingale and Pickles's account of Cavell see the idea of strength as distinctive of the two nurses – i.e. they are courageous, and associated with figures such as the patriot and the soldier – Hallam goes further, literally defining Nightingale as a “battleaxe” by drawing on her tough features as a woman. Hallam identifies the dichotomy “angel/battleaxe” as defining of the nurse, a binomial that, as we saw, is now seen as contradictory. As applied to Nightingale, the term is thereby enriching, adding to the identification of the nurse as model professional, at once defined by (feminine) caring attitude and (masculine) strength, courage and combativeness (*See also Poovey 1988*).

The analysis below illustrates, in particular, how Wilcox's Cavell and Nightingale manifest their “tough” nature, a trait that along with the distinctive ascribed features of their Britishness contributes to their professional authority.

Edith Cavell: a virtuous professional

As several reviews of *Nurse Edith Cavell* (*Daily Film Renter* 1939 13, 3871;

Monthly Film Bulletin 1939 6, 70; *Today's Cinema* 1939 53, 4321) – including *The Times*' (1939) and John Nangle's (2003) – confirm, Neagle's depiction of Cavell describes well the nurse's two-sided image. *The Times* commented: "Miss Anna Neagle [...] always keeps the dignity that is essential; she is quiet, perhaps a little superhuman, but this is obviously the right way to represent a heroic woman". Nangle highlights the same characteristic, describing Neagle's Cavell as both "a pre-Mrs. Miniver"⁸ and a metaphor for strength, since the actress "shows no emotions" even "when the Germans pick her up and hold a secret tribunal that finds her guilty" or "when her chief accuser [...] delivers a death sentence to her solitary cell" (p. 42).

In Cavell, the idea of heroism – a trait arguably connected to her "tough" side – is also related to notions of martyrdom and sanctity. The blending of these two features is key to the representation of Cavell as a virtuous professional, which emerges especially in the scenes portraying her relationship to male characters. Here, Cavell's quasi-religious virtues, such as her moral purity, and her leading role as a professional intersect, overt moral rectitude and great firmness always characterising her behaviour. Neagle's performance, in terms of gestures and expressiveness, as well as dialogue and framing support this characterisation.

The scene portraying Cavell's coordination of her clandestine hosts' escape offers evidence of this argument, her professional authority being conveyed through a focus on her distinctive, at once demure and authoritative, attitude.

⁸ Mrs Miniver (Greer Garson) is the protagonist of William Wyler's 1942 eponymous American production. Awarded six Oscars – including "Best Actress" (Garson) – and listed as one of AFI's "most inspirational films of all time", *Mrs Miniver* tells the story of a courageous English housewife during WW2. In 2009, the Library of Congress (See: Library of Congress) included *Mrs Miniver* in the National Film Registry, for being "an iconic tribute to the sacrifices on the home front".

Cavell gives instructions to the fugitives, standing in the middle of a circle while calling out the list of names. Her eyes are fixed on the document, which suggests detachment. She appears austere, her rigid pose reminiscent of an officer: her footsteps' hard sound, echoing in the hall as soon as she starts walking, further emphasise this idea. This helps towards her association with the military and authoritative battleaxe, underlined by *mise-en-scène*: although Cavell occupies the background of the frame, the spectator's attention is focused on her, the light uniform she wears standing out against the darkness of both the cellar and the soldiers' clothing (figure 1.37).



Figure 1.37



Figure 1.38

At this point, one of the soldiers improvises a funny pantomime, interrupting Cavell. With the camera in the same position, she observes the comic episode with the same seriousness and firmness, contrasting with the soldiers' smiling faces (figure 1.38). The comic man is in the foreground, moving backward and forward from the right to the left. At last, he falls down and this provokes an immediate reaction from Cavell: she runs to his rescue, showing a concerned expression (figure 1.39). This image visibly marks the passage from

her “tough” attitude to that of a merciful angel.



Figure 1.39



Figure 1.40

Subsequently, the camera pans slightly right and focuses on Cavell and the man, both of them now in the foreground. From this perspective, their expressions are more discernible: the fugitive, who has just admitted his intention, gives a grin of pleasure towards the camera, and Cavell responds similarly, as one can just about spot a timid smile on her face (figure 1.40) that suggests her empathy. Yet, her manifest amusement does not last long, her face suddenly becoming serious again, and conferring on her a renewed sense of authority.

It is worth repeating that Cavell's distinctive demeanour with the soldiers she has rescued is in contrast with most depictions featuring the nurse/man pair, as romance is absent (Hallam 2005, Stanley 2008). Textual analysis shows that Cavell's approach to men is resolute and distant, alien to any sort of romantic implication, but expressing chaste and maternal affection. This makes Cavell a virtuous professional, with her two-sided nature – caring, but also tough and detached – a crucial element in this type of depiction. A similar icon of professional authority is Nightingale in *The Lady with a Lamp*.

Florence Nightingale: a “tough professional”

Since the release of *The Lady with a Lamp*, several critics have remarked on the importance of Nightingale’s strength in the construction of her character. For instance, *The Monthly Film Bulletin* (1951 18, 213) describes Wilcox’s Nightingale as both the lovely lady curing wounded soldiers in war time and the indefatigable, “early iron lady”, remarking that such features “form two sides of the same character” (p. 341). Hallam (2000) also describes Wilcox’s biopic as a “worthy depiction that attempts to describe not only [Nightingale’s] experiences in the Crimea, but also her skills as an administrator and her romantic attachments and business connections to the men who assisted her in her aims and ambitions” (p. 42). This section aims at exploring the elements in the film that cast Nightingale as a “tough professional”.

In *The Lady with a Lamp*, initially, Nightingale’s powerful facet is described by reference to the ideological contrasts she forms with her conservative family: the latter judges her nursing vocation as inappropriate. The scene depicting the Nightingales’ formal dinner with notable British politicians like Lord Palmerston (Felix Aylmer) and Sydney Herbert (Michael Wilding) is particularly meaningful. Nightingale joins the table late as she has been working, which inevitably makes her professional aspiration the conversation’s main topic. Following an establishing shot, displaying Nightingale and the other people seated around the table (figure 1.40), the camera starts cutting repeatedly to move in on each of the participants to the discussion. Close-ups enhance the tense atmosphere, highlighting the characters’ agitated and strained expressions, but also

emphasising each one's heated statements.



Figure 1.41



Figure 1.42

In this scene, Nightingale's strong personality is principally expressed through her terse and sometimes insistent affirmations, although her rigid posture and facial features play an important role, too (figures 1.41 and 1.42). A medium close-up (figure 1.42) shows Nightingale's disappointment at listening to characterisations of nursing as an unsuitable profession for women. A frown of disapproval characterises her gaze, fixed on the guest she addresses. This helps convey her determined behaviour, courageously advocating her decision to pursue nursing work.

The film provides many other, equally effective portrayals of Nightingale as a "tough professional", most of which refer to her humanitarian mission in Scutari. There, as matron of a nursing team, she is often involved in animated and confrontational discussions with male local authorities and medical staff, to whom she stands up despite being a woman.



Figure 1.43



Figure 1.44

The images above (figures 1.43 and 1.44) are emblematic of these kinds of depictions. Again, dialogue importantly communicates Nightingale's grit, but her gestures, glances and general bearing also play a prominent role. In the medium shot above (figure 1.43) Nightingale stands rigidly behind the Barrack Hospital's doctor, who stands with his back to her. The two characters' dispositions in relation to each other suggests their divergent views, the man clearly refusing to confront Nightingale. Moreover, from the dual perspective of gender and hierarchy, this configuration also intimates their different status, with the man occupying the leading position – in line with both the time's patriarchal mentality and hospitals' hierarchical order, which traditionally subordinated nurses to doctors. However, the characters' expressions and gestures partly contradict this configuration, highlighting Nightingale's determination as opposed to the doctor's apparent hesitancy. Nightingale firmly addresses the physician: her tense facial features and gestures (i.e. her raised hand) express her insistence to be listened to. By contrast, the doctor's authoritative behaviour appears to waver, his eyes staring into the distance, and his posture less tense than hers, as his slightly open lips suggest. All this helps towards identifying Nightingale as the scene's more

determined protagonist, driving the action.

Nightingale's strong side is also apparent in her discussion with a male authority figure in Scutari (figure 1.44). In this case, the two characters look at each other and, visually, seem on an equal level. However, Nightingale is the real focus, due to a combination of elements. First, her position in the frame is more favourable, as she stands facing the camera, whereas the man is shot from behind. Clothing is also important, her white head-cover and collar standing out against the overall darker tonalities of the image. The light coming from the window behind Nightingale also contributes to direct the spectator's attention towards her, and so does composition – in particular the arch in the background, the light above Nightingale's head, and the pieces of furniture on the right hand side of the frame – marginalising the space around her. From this perspective, her expressions are given prominence, too: her angular facial features convey a sense of tension, and her intense gaze towards her interlocutor, further reinforce her speech's challenging character.

These few examples arguably draw a symbolic relation between Nightingale's powerful facet and the battleaxe, a metaphor for female strength and command. Significantly, she demonstrates these strong features whenever she is defending nursing: this enables the audience to link her nursing vocation to her status as an early "iron lady".

By contrast, this type of characterisation is not found in *The White Angel*, Dieterle's biopic of Nightingale. Although this film also considers her strength of character, for example by touching on her contrast with the patriarchal society she lives in, the greatest emphasis is given to her angelic aura. The predominant views

of Kay Francis's Nightingale either show her as a maternal figure, or idealise the nurse through magnificent close-ups, where she usually wears glamorous light-coloured clothes. Dieterle's *mise-en-scène*, including his use of lighting, and Francis's great expressiveness convey a distinct angel-like image, but also imbues the scene with deep sentimentality that greatly detracts from the projection of professional authority.

Ultimately, Wilcox's vision of Nightingale also differs from his vision of Cavell. Although both nurses show a two-sided character, combining maternal and tough features, the strong facet of Cavell is mainly portrayed in terms of affirmative professional detachment, a behaviour that is especially apparent in relation to male characters, and which supports her identification as a "virtuous" professional. Instead, as we saw, Nightingale's strong facet especially emerges when she courageously defends nursing against the patriarchally structured institutions of her time. Her fierce determination in supporting the profession shapes her definition as a "tough" professional.

As my thesis will illustrate, Nightingale and Cavell are not the only affirmative examples of strong nurses displayed in film; however most 20th century nurse-characters defined by strength ultimately fall into a derisive and stereotypical vision of the "battleaxe". In the introduction, I referred to Hattie Jacques's matrons in the *Carry On* series – to which I will return in chapter four – as emblematic of this stereotype. Indeed, John Daly (2005) included Jacques's characters among the best-known nurse-battleaxes on screen, which he defines as "tyrannical, fearsome, asexual, cruel, monstrously large, dark-clad, and set on crushing all fun and individuality".

A question follows, inevitably: why has the battleaxe's glorious symbol, which found in Nightingale one of its historical metaphors, turned into a derogatory stereotype of these professionals? In this respect, we can turn to the testimonies of some nurses Julia Hallam (2000) interviewed, and who undertook their training in 1950s London. As they stress, the nursing system, with particular regard to training, relied on a "matriarchal" and "quasi-military" structure, where discipline dominated. Most interviewees identified the epitome of this strict hospital organisation in the ward sister, about whom "images of nurses as either the handmaidens of doctors or self-sacrificing angels are most inappropriate" (p. 153). Sisters were indeed fairly autonomous, and usually in charge of their position over most of their career. In this light, the interviewees' association of sisters as either "bossy but kindly motherly figures" or "punitive authoritarian spinsters" becomes more intelligible, especially in a patriarchal society imbued with distrust of women in positions of authority.

Even though the interviewees claim that films, television programmes, novels and magazines portraying experienced nurses only had a small impact on these views (p. 153), it is important to consider the role these "battleaxe" characters play in the narrative, and the genre of films they feature in. In chapter two, I offer some examples of caricatural battleaxes within the section on recruitment melodrama. A more detailed account of the nurse-battleaxe is provided in chapter four, on comedies – a genre that "articulate[s] opposition to norms through the freedom of carnivalesque forms", and where "exaggeration and fantasy [...] allow for the expression of social and psychic tensions" (Swanson 1994: 94). As protagonists of biopics, the strong Cavell and Nightingale depicted

by Wilcox clearly differ from these grotesque and derisive characters: rather, they reflect the positive traits that originally defined the legendary battleaxe figure.

Overall, Wilcox's Cavell and Nightingale – maternal angels, quasi-religious (thus, a-sexual) heroines, and reassuring emblems of virtuous professional conduct – appear particularly praiseworthy, in line with the genre of the biopic, in which “key historical figures become stars” (Custen 1992: 4). Turning into paradigms for nursing ideals and for Britain's celebration in wartime, Cavell and Nightingale ended up glorified in a film genre that, especially in those years, was almost exclusively dedicated to royal profiles, legendary commanders and famous men of science and letters. As Queen Alexandra put it in 1916, Cavell and Nightingale were among “the great and noble women of the world” (quoted in Pickles 2007: 96).

CHAPTER TWO: Nurses in Melodramas¹

From the inception of narrative cinema, nurses have featured in melodrama. Scholars have written extensively on this cinematic genre, whose origins go back to 19th century theatre. Lesley Stern (1994a) offers a concise overview of melodrama. In film, the genre inherited and developed many of the earlier stage melodrama's features, typical of which is the exaltation of emotions, mainly conveyed through emphatic bodily gestures and facial expressions. Music is another crucial element, further enhancing the actors' performances and the scene's pathos. Plots and characters also tend to respond to specific characteristics: the conflict between innocence and villainy is pivotal, and primarily reflected in the constant struggle affecting the film's protagonist (p. 259; *See also*: Landy 1991a; Bratton, Cook & Gledhill 1994).

The deeply emotional character of melodrama – a main point of interest in my analysis of melodramatic nurses, as I will explain shortly – has led to its identification as a feminine genre, in contrast to supposedly masculine genres such as the western and the thriller (Stern 1994a: 259-60). Emphasising sexual difference, this gender-based definition has attracted the attention of feminist film theorists who, from the late 1970s, have contributed substantially to melodrama's critical re-evaluation. This trend started in the late 1960s, “when [...] Anglo-Saxon film criticism opened up to French structuralist and neo-Marxist aesthetics” (Gledhill 1994: 5-6). In 1972, Thomas Elsaesser published “Tales of Sound and Fury”, “the earliest [...] and most comprehensive account of film melodrama”

¹ Based on this chapter, I published: Babini, E. (2012). “The representation of nurses in 1950s melodrama: A cross-cultural approach”. *Nursing Outlook* 60(5), S27-35.

(Gledhill 1994: 7). In terms of psychoanalysis, a key contribution came with Geoffrey Nowell-Smith's "Minnelli and Melodrama" (1977). Shortly afterwards, feminist scholar Laura Mulvey wrote "Notes on Sirk and Melodrama" (1977/8), interrogating the genre from a gender perspective.

With particular regard to feminist film theory, Annette Kuhn (1984) highlights: "not only are film melodrama (and more particularly its subtype the 'woman's picture') [...] directed at female audiences, they are also actually enjoyed by millions of women", because their "construction of narratives [is] motivated by female desire and processes of spectator identification governed by female point-of-view" (p. 18). While acknowledging Kuhn's views, Christine Gledhill (1994) contends: "melodrama's investment in woman as patriarchal symbol conflicts with the unusual space it offers to female protagonists and women's concerns" (p. 13). Melodrama's approach to the representation of women thereby appears controversial: despite its "feminine" nature, the genre is deeply rooted in patriarchal culture. Moreover, as a western cinematic product, melodrama also includes a racist bias: it depicts women as preponderantly white, evoking beauty, purity, and goodness (Dyer 1997), besides being a metaphor for "respectability" (Skeggs 1997).

The complex connection between women and melodrama described above is also apparent when the female subject in question is a nurse. Significantly, with the exception of recruitment films, melodrama is the most prolific cinematic genre in terms of the representation of nurses. This is revealed in my film corpus. Out of the 250 American, British and Italian feature films released between the first

decade of the 20th century² and the present, over one third are melodramas. In all these productions, nurses are featured as either protagonists or in main roles, and identified as “respectable” white individuals, overall.

While interrogating nurses’ widespread presence within the genre, my study aims to illustrate how these professionals distinguish themselves as melodramatic heroines. The issue of representation shall be, again, central to my discussion, with film textual analysis the main vehicle to support my arguments. The latter will be underpinned by the reference to different areas of research: feminist film theory, the history of cinema and of the nurse film.

The survey of the 94 melodramas about nurses included in my corpus has led me to single out these films’ most recurrent themes and representational trends. A first key element is romance. Apart from some (rare) exceptions, this is a recurrent feature – in contrast, as we saw, to biopics. In melodrama, love in all its nuances marks the relationship between the nurse and either the patient or the doctor she assists. This trend is identifiable in the vast majority of melodramas about nurses I have scrutinised, including the case studies in this chapter.

It should be remarked that romance features prominently in most nurse films – including thrillers and comedies, too. On the one hand, as we saw in the introduction, this is typical of the working woman film: in a patriarchal society, the dominant idea is that women do not find self-realisation in their job, but rather in love, marriage and the family – a viewpoint clearly undermining their value as workers. This chapter explores the balance between professional activity and

² Some of the films released in the first two decades of the 20th century actually are “shorts”. However, I decided to include them in my corpus as examples of “early proto-features”.

romance in relation to melodramatic nurses, thereby also considering why, in the nurse film, doctors and especially patients are mainly men – a configuration not found in real life.

In melodrama, the themes of care, self-sacrifice and expertise are prominent and, where emotions play a key role, these will be examined through theories of affect. In particular, I will consider how nurses perform their emotions, and how they manage them in their relationship with patients. The studies of Pam Smith (1992), Julia Hallam (1998), and Anna Gibbs (2010) will be key reference points in my analysis. Predictably, the angel as a figure recurs also in this thematic context, as in the numerous melodramas that depict nurses in wartime. My corpus includes around 30 films of this kind, where romance most commonly involves the nurse and her patient, often a soldier. Ethyle Batley's *Red Cross Pluck* (UK, 1914), George W. Hill's *Tell It To The Marines* (US, 1926), Frank Borzage's *A Farewell to Arms* (US, 1932), Roberto Rossellini's *La nave bianca/The White Ship* (IT, 1942), Richard Brooks's *Battle Circus* (US, 1953), Martin Ritt's *Adventures of a Young Man* (US, 1962), Peter Hyams's *Hanover Street* (UK, 1979), Richard Attenborough's *In Love and War* (US, 1996), and Joe Wright's *Atonement* (UK, 2007) exemplify this trend over the decades.

However, not all melodramatic nurses are “angels”. George Stevens's *Vigil in the Night* (US, 1940), for example, juxtaposes “angelic” nurse Anne Lee (Carole Lombard) with a rather inexperienced and unethical nurse, her sister Lucy (Anne Shirley). The dichotomy good/bad nurse, here reflected in the Lee sisters, is a common motif in melodramas featuring nurses. In *Vigil in the Night*, this polarity mainly concerns the professional sphere, and is conveyed through the

contrast between a “good” (professional) nurse and a “bad” (unprofessional) one. In other cases, for example Alberto Lattuada's *Anna* (IT, 1951), one of my case studies in this chapter, the bad/good dichotomy is instead reflected in the change affecting the film protagonist once she embarks upon her nursing career. By the end of the film, the good nurse is usually “rewarded” either with her beloved’s love, with a gratifying career, or both.

One last type of melodramatic nurse is the self-reliant woman, whose characterisation involves, on the one hand, romance and, on the other, courage and know-how. Lieutenant Janet Davidson (Claudette Colbert) in Mark Sandrich's *So Proudly We Hail* (US, 1943) is emblematic of this type of nurse, amongst whose earliest examples is Masie, the protagonist of Batley's *Red Cross Pluck* (UK, 1914). As the title suggests, Masie is a courageous nurse, who eventually falls in love with British combatant Jack Gordon. Although the film’s official aim was recruiting soldiers for WW1 (Imperial War Museum), *Red Cross Pluck* appears rather as a tribute to its central nurse; one interesting point in this sense is the filmmaker's biography: Batley is considered “Britain's pioneering woman film director” (Turvey 2009).

In addition to the films mentioned above, the representational trends I have outlined are also identifiable in such works as: Thomas Edison's *Love and War* (US, 1899), Lewin Fitzhamon's *Rescued by Rover* (UK, 1906), Edwin Carewe's *The Splendid Sinner* (US, 1918), Allen Holubar's *Heart of Humanity* (US, 1918), Geoffrey Barkas's *Palaver* (UK, 1926), Irving Cummings's *The White Parade* (US, 1934), Lambert Hillyer's *Once To Every Woman* (US, 1934), Robert Florey's *Registered Nurse* (US, 1934), Charles Barton's *The Last Outpost* (US, 1935),

Howard Hawks's *The Road To Glory* (US, 1936), George B. Seitz's *Between Two Women* (US, 1937), Lew Landers's *The Man Who Found Himself* (US, 1937), Carol Reed's *Bank Holiday* (UK, 1938), S. Sylvan Simon's *The Nurse From Brooklyn* (US, 1938) and *Four Girls in White* (US, 1939), John H. Auer's *Women in War* (US, 1940), Augusto Genina's *L'assedio dell'Alcazar/The Siege of Alcazar* (IT, 1940), Charles Barton's *Parachute Nurse* (US, 1942), Richard Thorpe's *Cry Havoc* (US, 1943), H. Brice Humberstone's *To The Shores of Tripoli* (US, 1943), Maurice Elvey's *The Lamp Still Burns* (UK, 1943), Clarence Brown's *The White Cliffs of Dover* (US, 1944), Roberto Rossellini's *Paisà/Paisan* (IT, 1946), Mervyn LeRoy's *Homecoming* (US, 1948), Elia Kazan's *Pinky* (US, 1949), Philip Leacock's *Life in Her Hands* (UK, 1951), Curtis Bernhardt's *The Blue Veil* (US, 1951), Stuart Heisler's *Saturday Island* (UK, 1952), Lew Landers's *Torpedo Alley* (US, 1952), Guido Brignone's *Noi peccatori* ("We Sinners", IT, 1953), Henry Hathaway's *White Witch Doctor* (US, 1953), Pat Jackson's *The Feminine Touch* (UK, 1956), Charles Vidor's *A Farewell to Arms* (US, 1957), Cyril Frankel's *No Time For Tears* (UK, 1957), Philip Dunne's *In Love and War* (US, 1958), J. Lee Thompson's *Ice Cold in Alex* (UK, 1958), Joshua Logan's *South Pacific* (US, 1958), Fred Zinnemann's *The Nun's Story* (US, 1959), Otto Preminger's *Exodus* (US, 1960), Gordon Douglas's *The Sins of Rachel Cade* (US, 1961), David Swift's *The Interns* (US, 1962), Aldo Lado's *La disubbidienza* ("Disobedience", IT, 1981), David Lean's *Doctor Zhivago* (US/IT, 1965), Milos Forman's *One Flew Over the Cuckoos' Nest* (US, 1975), Anthony Minghella's *The English Patient* (US/UK, 1996), and Michael Bay's *Pearl Harbor* (US, 2001).

My survey of these melodramas has allowed two key questions to emerge.

One concerns the relationship between Italian melodramas featuring nurses and the country's nursing history, which my first case study will detail. Most Italian melodramas with nurses were made between 1940 and the early 1950s – at the time of, and immediately after WW2. Because of the war, nurses' crucial role was likely to be more apparent in Italy, where nursing had never achieved the professional and social importance it had in America and Britain. Among others, Isabella Pascucci and Calogera Tavormina (2012) suggest this when accounting for the “different evolution” of Italian nursing in relation to other countries, Britain and America, especially (p. 21).

The other point is important to my second case study. I have observed that the narrative and the style of several American and British melodramas released between the 1930s and the 1950s clearly reflect some characteristic traits of nursing recruitment films. However, the productions in question were not officially aimed at recruitment, unlike other contemporary melodramas that were funded by governmental institutions. These films, rather, inaugurated a melodramatic sub-genre that I call the “recruitment melodrama”.

The section on recruitment melodramas draws attention, among other things, to the question of race. As previously observed, screen nurses are overwhelmingly white – unlike the actual nursing workforce in America and Britain. Given these films' recruiting aim, how could white feminine ideals be perceived by and impact on a non-white audience, especially in light of the suggested equation “white/respectable”? I examine this question by referring, in particular, to the work of Richard Dyer (1997) and Beverly Skeggs (1997).

As the angelic nurse has already been analysed in chapter one, here I shall

concentrate on the other types of nurses: the “bad”, the “good”, and the “self-reliant”. My first case study concentrates on the first two types, discussed through a comparative analysis of Alberto Lattuada's *Anna* (IT, 1951) and Fred Zinnemann's *The Nun's Story* (US, 1959). Examples of the “self-reliant” nurse are offered in the second case study, focused on S. Sylvan Simon's *Four Girls in White* (US, 1939) and Pat Jackson's *The Feminine Touch* (UK, 1956).

Besides their significance in terms of nurses' types, the choice of the two sets of films has depended on other factors. In *Anna* and *The Nun's Story*, the protagonists' identity as “religious nurses” allows a fruitful cross-cultural discussion to emerge, highlighting the importance that Italian and American cultures and nursing histories have respectively had on the representation of nurses and on narrative trajectories. Moreover, besides the two films' importance in terms of the history of cinema and stardom – they include two famous stars, Silvana Mangano and Audrey Hepburn, and are made by prominent directors – their critical appreciation in terms of films about nurses has been slight.

The same cannot be said of *Four Girls in White* and *The Feminine Touch*: the Kalischs (1987) and Julia Hallam (2000) consider these films, where nursing is the central theme. My analysis builds on these scholars' readings. In particular, textual analysis enables me to pinpoint the elements rendering these melodramas' protagonists particularly appealing to (white) women. This aspect, together with the films' emphasis on training, is the basis of their unofficial yet evident recruiting project, which legitimates their identification as examples of the “recruitment melodrama” sub-category.

2.1 Diversely-alike melodramatic religious nurses: *Anna* and *The Nun's*

Story

During the 1950s, at the peak of melodrama's success in western cinema (Schatz 1981, Sorlin 1996), Italian director Alberto Lattuada and the Austrian-American Fred Zinnemann made, respectively, *Anna* in 1951 and *The Nun's Story* in 1959, two melodramas centred on a nurse. Besides being canonical melodramas, the exaltation of emotions and the idea of conflict distinguishing their respective plots and protagonists' depiction, these films offer an interesting characterisation of the nurse: in both cases, she is also a nun, and this double identity is crucial to her representation, and to the overall narrative. This dual-faceted depiction also complies with nursing's dominant images in popular culture that, we saw, tend to associate the two female figures by virtue of the profession's religious origin. The protagonists' numerous close-ups underline this visual connection, too, recalling religious iconography – Marian images, especially.

Anna is the story of the eponymous nightclub entertainer, played by Silvana Mangano, whom two men pursue: Vittorio (Vittorio Gassman) and Andrea (Raf Vallone). They epitomise the “bad” and the “good” man, respectively, as their trajectories also reflect. Vittorio is a worldly man who works as a barman, and is the object of Anna's sexual desire. Andrea is a wealthy young farmer who lives in the country; his relationship with Anna reflects his genuine nature, as a more domesticated vision of romantic commitment. Anna's inner conflict mirrors, in turn, their binary opposition: unable to decide between the two men, she is initially involved in both relationships. This potentially explosive emotional situation comes to a head when, with Anna engaged to Andrea, and on the point

of marrying him, desperate Vittorio traces Anna to win her back. When Andrea realises this, the story reaches a new melodramatic height: following a fight between the two men, Andrea accidentally shoots Vittorio and kills him. These events unfold in flashback, as the drama had eventually brought Anna to radically change her life: she had decided to leave the sinful world and dedicate herself to the welfare of others by becoming a religious nurse. Her vocation, however, is put at risk when, due to a serious accident, Andrea is rushed to Milan's Maggiore Hospital, where Anna works. The two inevitably meet, and Andrea asks her to return to him. Though seriously tempted, Anna perseveres with both the religious and nursing life. She thereby embodies the stereotypical image of the bad girl turned good thanks to nursing – as Hallam (2005: 105) discusses in a different context – although here religion partly alters this cliché. As we will see, the role of religion in Anna's trajectory becomes more intelligible in relation to 1950s Italian cultural history. Nursing, however, is also a foundational element of her identity: for Emiliano Morreale (2011), Anna is “first and foremost a nurse, then a nun” (p. 259). Though, as my analysis will show, I do not agree with Morreale, his reading is nevertheless indicative of the importance nursing holds in Anna's characterisation.

A different perspective emerges from *The Nun's Story*. In the 1920s, Belgian Gabrielle Van der Mal (Audrey Hepburn), the daughter of a renowned physician, shares her father's professional inclination. In spite of this, she decides to enter a convent, since she feels this is her real vocation. Although she is sad to leave, not even her father's heartfelt disapproval can make her change her mind. He believes she is not meant to be a nun, as he can see her “chaste and poor” but never

“obedient”. Moreover, he suspects her desire to practice nursing as a nun – the order owns a mission in the Belgian Congo – is the true reason for Gabrielle's commitment to the religious calling. Thus, he warns her that the Order imposes on all novices the requirement to repress their deepest desires, as an offering to God. Notwithstanding such misgivings, and certain of her calling, Gabrielle eventually enters the convent and becomes Sister Luke. Though she finds it hard to observe the monastic rules, she is eventually assigned to the missionary post, therefore realising her dream. In the mission, she cooperates with atheistic, rude and cynical Doctor Fortunati (Peter Finch) – the film's version of the melodramatic “bad” man. Despite their divergent views, the two admire each other: Sister Luke is an excellent nurse, while he is recognised as a brilliant surgeon. However, Fortunati also perceives Sister Luke's inner struggle: observing monastic rules – from the Grand Silence obligation, to morning prayers and fasting – often ends up compromising her professional integrity as a nurse, which feeds her frustration. Fortunati's repeated advice is for her to give up the vows in favour of a nursing career. Yet, only the outbreak of WW2, and news of her father's death at the hands of the Germans make Sister Luke understand her real calling: she leaves the religious order to start a new life that, the film suggests, will be devoted to nursing. Her relieved expression after sharing the decision to leave with a colleague, who remarks she will always be welcome to work in the ward, is an eloquent sign of her future life. The same opinion, amongst others, is Arthur Nolle's (1994).

The above suggests a number of parallels between Anna and Gabrielle. To start with, both are initially laywomen, looking for something that can give

meaning to their existence. They both enter a religious order and work as nurses. In both cases, nursing is seen as highly rewarding and far more valuable than love and, in one case, religion. Finally, in their own ways, both protagonists decide to make this profession their lifelong vocation and, by virtue of this, become “better” individuals, in accordance with the melodramatic trope. That said, at least two elements differentiate Anna and Gabrielle: the value they confer on religion, and their overall characterisations. As for the first question, abandoning the convent is the key to Gabrielle’s eventual life goal (nursing), whereas for Anna religion is as important as nursing to her final redemption. In terms of their characterisations, Anna and Gabrielle clearly epitomise different female types, which Silvana Mangano’s and Audrey Hepburn’s very different star personas underline: Mangano is the emblem of “Italian sensuality” in film (Landy 2008: 109), while Hepburn is an international symbol of “timeless, elegant and non-sexual beauty” (Moseley 2002: 2).

My account above also highlights how struggle and conflict are key to Anna’s and Gabrielle’s status as melodramatic heroines, and to their trajectories. My aim in what follows is to examine how their identity as nurses affects Anna’s and Gabrielle’s melodramatic characters. Subsequently, I discuss the influence Italy’s and America’s cultural and nursing histories exert on the protagonists’ representation as religious nurses.

2.1.1 Images of redemption: “bad”, “good”, and “better” women

The idea of nursing as a redemptive profession is one of the key features of Lattuada’s and Zinnemann’s films. Nevertheless, the two directors approach the

redemption theme from different angles. Overall, Anna is a “weak” individual: initially portrayed as a bad woman, her dubious morality and promiscuous behaviour even indirectly cause one of her lovers’ death (Vittorio's shooting follows his insane attempt to win Anna back before her wedding with Andrea). Thus, Anna embarks on her vocation as a form of atonement. Human frailty distinguishes her character also when she is a religious nurse, as “good woman” status does not really define her until the film’s very end. As Morreale (2011) stresses, the duality of Anna's trajectory, from guilt to redemption, is typical of women’s representation in Italy's 1950s melodrama (pp. 258-9). Films like Raffaello Matarazzo's *I figli di nessuno/Nobody's Children* (1951) and *L'angelo bianco/The White Angel* (1955), and Augusto Genina's *Maddalena* (1954) – dealing with the religious theme, in turn – confirm the trend.

By contrast, Gabrielle is a “strong” individual, whose determination is apparent in all her actions. Although she is never a bad woman, she feels as such and struggles to better herself. She then enters a convent, keeping faith with her religious calling tenaciously, until she realises nursing is what can really make her a better individual. Therefore, following Doctor Fortunati’s advice and, earlier, her father’s – both physicians whom she holds in high esteem – she leaves the order to pursue her ideal.

Thus, in the films under discussion, the idea of nursing as a redemptive experience develops through three main female types: in *Anna*, the “bad” protagonist becomes “good”; in *The Nun's Story*, she becomes a “better” individual. In what follows, I will examine how these three female types are conveyed in the films through textual analysis of key scenes.

Anna

An account of *Anna* cannot be set aside from reference to the cinematic landscape of post-WW2 Italy. Characteristic of those years is the Neorealist style, through which “film-makers wished to differentiate their films from those of the recent past for ideological reasons”, therefore having “the opportunity to say something new about Italy, and to portray sections of the population who had not had much screen time devoted to them – the working class” (Wood 2005: 87). According to Marcia Landy (2008), this current not only favoured popular commercial cinema’s revival, but also strengthened the stars’ role in post-war society. One of the biggest stars of the period was Mangano who, two years before *Anna*, had become famous with *Riso amaro/Bitter Rice* (IT, 1949), a film connecting “the neorealist experiment and the popular cinema of the 1950s” (Grignaffini 1988: 120).

Mangano is emblematic of the image of the female body offered in post-war Italian films. In line with the Neorealist style’s social agenda, this new figure echoed Italy’s changes in the post-fascist era. Her curvaceous figure and sex appeal epitomised the country’s renewed wellbeing and social progress, embodied in the so-called *maggiorate fisiche* (women with large breasts and hips). Although many key actresses of the period – i.e. Gina Lollobrigida and Sophia Loren – complied with this beauty model, Mangano’s body in particular became a metaphor for Italian sensuality in films, and not just within the national boundaries (Gundle 2007). Images of Mangano’s seductive dancing – in *Anna*, but also in *Riso amaro* (1949), *Il Lupo della Sila/Lure of the Sila* (IT, 1949) and

Mambo (IT, 1954) – are indeed, even now, totemic references in any account of women in post-war Italian cinema.

The emphasis on this type of voluptuous female beauty – whose typical traits are a slender body, generous bosom and shapely legs – has brought critics like Landy (2008: 110) to define its representative films in terms of “pink” or “rosy” Neorealism. Such films – of which *Anna* is emblematic – were often criticised as too popular and for their hybrid character, betraying Neorealism’s original aim by connecting its features with what Landy describes as “the cinema of the body” (p. 110). Giovanna Grignaffini (1988) identifies these productions’ real landscape with their female stars, whose distinctive traits became “operators of a new national identity and physical characteristics, bodies and gestures” (p. 121).

Unitalia Film (1951 6) defined *Anna* as “a battle between sensuality and duty” where, eventually, “the voice of the charity mission [...] prevails”. This commentary summarises Anna’s core features: the idea of conflict, and the absolute relevance of her twin-track vocation. The first element I consider here is sensuality – Mangano’s distinctive feature that Anna clearly mirrors as a nightclub entertainer, unsurprisingly, but also, interestingly, as a religious nurse. Emblematic of “sensual lay Anna” is a very famous scene where, scantily dressed, she performs a provocative samba with two semi-naked black men. The latter’s presence further enhances the scene’s overall sensual charge, conferring on Anna a risqué aura. Dealing with the British context, Skeggs (1997) identifies the parallel black/sexuality as “an attempt to legitimate colonialism” since “both Black women and men were designated as the dangerous, atavistic sexual other”,

which has rendered the “display of sexuality [...] a practice of the ‘other’ [...] the uncivilized” (p. 121). Dyer (1997) foregrounds similar concepts in his study of whiteness in western culture; and, significantly here, so does Giovanna Tomasello (2004) in her account of Italian colonialism and its conception of African people.

Turning back to the sequence, its canonical status within the history of Italian cinema shows in the fact that segments of it appear in Giuseppe Tornatore's *Nuovo Cinema Paradiso/Cinema Paradiso* (IT, 1988) and in Nanni Moretti's *Caro diario/Dear Diary* (IT, 1993). Music also plays a significant role to this end. The composer Armando Trovajoli saw in that “silly music motif” – entitled “El Negro Zumbon” – the prime reason for both Mangano’s popularity and the film’s huge success (Lattuada 2008), and there have been several versions of the song, some of which are in existence today, confirming its popularity.

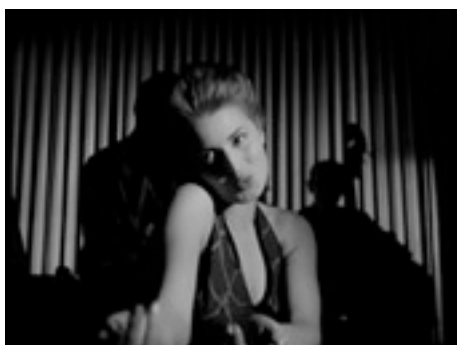


Figure 2.1

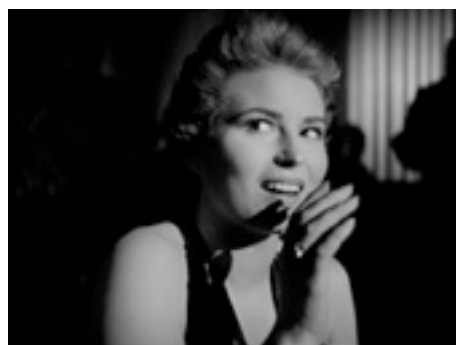


Figure 2.2

In the sequence, a number of elements enhance Anna's provocative appeal, which identifies her as a sinful woman. Framing and lighting emphasise her seductive expressions, her captivating white body and its movements. Close-ups highlight her alluring look (figure 2.1) and enticing behaviour (figure 2.2). Long

shots exalt her sensuous bodily curves (figure 2.3), which light beams and tight clothing further magnify (figure 2.4), accentuating her centrality to the image, and revealing her curvaceous, hourglass figure. Her outfit is also cinematically coded: it recalls Mangano's Silvana in *Riso amaro*, the film that made the actress a post-WW2 international emblem of Italian beauty.



Figure 2.3

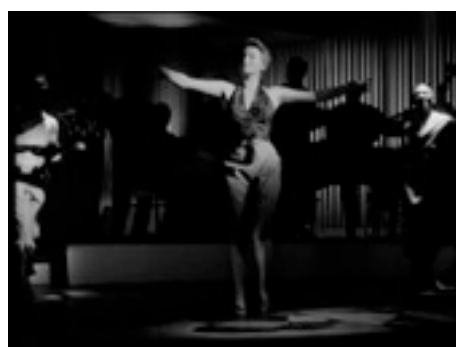


Figure 2.4

To some extent, the same sex appeal characterises Anna when she becomes a religious nurse. In this case, however, her distinctive allure is mainly conveyed through her facial traits and expressions, her sinuous physicality being only hinted at under the austere clothes. Accordingly, close-ups – the film’s characteristic shot (Landy 2008: 113) – are here particularly significant, enhancing Anna's peculiar “chaste sensuality” (figures 2.5 and 2.6). Lighting is also important, illuminating her facial features, and making them stand out from the darker surroundings. Likewise, the light-coloured head covering that frames Anna's face exalts by contrast her darker traits. Tight framing and austere clothing also allow two highly suggestive details to emerge more strongly: on the one hand, Mangano/Anna's full, sensual and partly opened lips, exuding an undeniable sensuality; on the

other, her very slightly crossed eyes, a feature whose peculiarly sexual attractiveness has called scholarly attention (*See*: Bronstad, Langlois & Russell 2008), and which distinguishes a number of acclaimed actresses, i.e. Norma Shearer, Karen Black, Annie Girardot and Barbra Streisand.



Figure 2.5



Figure 2.6

Through Mangano's star persona, Anna's move from lay to religious thus retains sexual connotations. Morreale (2011) also makes this point when arguing that Mangano's image in monastic vestments has a "different" but "no less erotic" effect on the public than that of the actress wearing shorts as a *mondina* (the Italian paddy fields female worker) in *Riso amaro* (p. 258). Arguably, by dramatically contradicting visual expectations of her figure, Anna's religious character becomes the enhanced object of attention from the audience. That said, her religious identity also plays a role in conveying sexual meaning. Being "emotionally and physically inaccessible to male coercion", nuns have become "an underground sexual fantasy" – an account of "nunsploitation cinema" claims (Talking Points from Channel 4). In this light, Anna wearing chaste monastic vestments makes her character even more sexually desirable.

Mangano's heightened sexual appeal as a nun in *Anna* is not unique in cinema. A similar perspective, although reversed in terms of gender, applies to French sex-symbol Jean Paul Belmondo in *Léon Morin, Prêtre/Léon Morin, Priest* (FR, 1961), Belmondo playing a Catholic priest who becomes the object of a woman's desire. Ginette Vincendeau (2003) remarks: "the contrast between [Belmondo's] [...] star persona and his identity as priest" is precisely what "creates Morin's sexual and emotional charge". Adrian Danks (2009) adds: "Belmondo [...] use[s] his sexual magnetism to draw women to the church while never really swaying in his devotion to his vows and ecclesiastical purpose". The same symbolic opposition applies to other attractive Catholic priests in the history of cinema, including Montgomery Clift's Father Michael Logan in Albert Hitchcock's *I Confess* (US, 1953), and Marcello Mastroianni's Father Mario in Dino Risi's *La moglie del prete/The Priest's Wife* (IT, 1971).

Turning back to Anna, her charm and (sexual) appeal as a religious nurse mostly emerges in those scenes connecting her to the male sphere, either through the depiction of her relationship with male patients and medical staff or through allusions to her previous love life. As we saw, before becoming a religious nurse, Anna was a nightclub entertainer who was in love with two men. This particular incarnation of herself exemplifies the screen working woman's "default" sexual connotation, as discussed by Carolyn L. Galerstein (1989), Judith Mayne (1995) and Yvonne Tasker (1998) in relation to other types of working women, e.g. secretaries and airline stewardesses. In *Anna*, this sexual identity is further enhanced, on the one hand, by Anna's profession as a female performer exposed to a predominantly male audience and, on the other hand, by her promiscuous

love life. As a religious nurse, Anna is also made to interact primarily with men. This magnifies her sensual aura further, already underlined by Mangano's distinctly sexy star image. In a typical melodramatic twist, one of Anna's patients is her former fiancé; the rest of her entourage is composed of mainly male patients and doctors who flatter her for being beautiful, well mannered and professionally gifted. By contrast, the film features only one female patient: an older, awkward woman who, nonetheless, can capture a fellow convalescent's heart. *Anna's* representation of the female sphere, with women invariably seen as objects of male desire (even in a religious context, or as laughable older women) falls squarely within patriarchal representations, and is a configuration overall identifiable in many other melodramatic nurse films of the period – for instance, in the recruitment melodramas.

In *Anna*, the contrast between abstinent monastic life and heterosexual desire – one of the reasons for Anna's melodramatic struggle, as the pathos marking the scene analysed below confirms – is itself reminiscent of the idea of immorality, and thus badness, which is Anna's defining trait before she realises her calling. Sister Anna's conflict between flesh and spirit marks, especially, the scene of her meeting with Andrea (her former fiancé) at the hospital where she works: prey to emotion, she suddenly decides to take off her veil (figure 2.7). Besides highlighting the protagonist's attractiveness – her loose hair, now visible, enhances her seductive femininity – the act clearly translates the conflict between love and religious duty, worldly and spiritual dimensions, which impacts on and defines Anna's character throughout the film. Here, it is clearly religion, and not nursing, which generates Anna's inner conflict, not her duty as a nurse. Even more

significantly, she removes the veil, her religious identity's sign. Without it, Anna feels free to have more intimate contact with Andrea – which, up to this moment, she had repeatedly tried to avoid.



Figure 2.7



Figure 2.8

Only at the end does Anna's calling both as a nurse and a nun prevail over her worldly attachments. She makes this crucial decision during the scene where, although tempted to start a new life with Andrea, she eventually rejects his romantic invitation and runs back to the hospital. In melodramatic fashion, this coincides with the moment when crowds of people have just rushed in because of a train derailment. In a medium close-up, Sister Anna symbolically stands behind the hospital gate, bewildered. *Mise-en-scène* here suggests the idea of prison, and her expression reflects a deeply frightened state (figure 2.8). Music further sustains the scene's high emotionality. Significantly, though, her struggle stops as soon as she hears the ambulance's siren: the sound enables her to turn her back on the world outside the hospital, as she understands the latter is the only place where she can find real comfort. Anna's hopeful look, here portrayed in a medium close-up, effectively expresses this feeling (figure 2.9).

This scene squarely fits Anna Gibbs's (2010: 186) account of the representation of affect as a mimetic process, where emotions – performed through facial expressions, postures and movements – are ultimately shared among all those involved in the process. Mangano's performance conveys emotions (through facial expression, mainly), thus allowing the audience to perceive immediately Anna's identification of religious nursing as her true call – unlike romance. Notably, the shots conveying Sister Anna's ultimate decision exalt her whiteness through the contrast between her immaculate wimple and the dark surroundings (figures 2.8 and 2.9). Besides recalling the traditional association of the nurse with the angel, we saw how the colour white also connotes respectability: Sister Anna's immaculate appearance (figure 2.9), at this crucial juncture in her narrative trajectory, therefore, also symbolically anticipates her final choice (of religious nursing over love). Interestingly, drawing on the value that "Catholic worship", and "the Marian cult" in particular, held in post-war Italy, Louis Bayman (2015: 66) also associates this representation of Sister Anna to that of the Virgin.

Notably, the "positive" affect generated by Mangano's restrained performance in the scene examined above contrasts strongly with the very different affect generated by her near hysterical behaviour in an earlier scene, when Andrea accidentally shoots (and kills) Vittorio; Bayman (2015) comments: "the orchestration of the sounds of water, fighting, sobs, the gunshot" – namely the affect created by *mise-en-scène* – "feeds into a more developed extension of pathos from the female star's performance" (p. 28), as Mangano's Anna starts shouting before collapsing on the floor. Mangano's performance communicates

Anna's delirium – the ultimate effect her ambiguous love life has on her. By contrast, this shows the redemptive role of religious nursing in her trajectory, as my analysis of Sister Anna's representation above illustrated.



Figure 2.9



Figure 2.10

Sister Anna's identification of religious nursing as her true calling is illustrated in the scene depicting her return to the hospital. Faced with an emergency, and although doctors and nurses surround him, the head physician desperately seeks Anna. This suggests her professional skills as a nurse, which the film signals more than once through both the head physician's and Anna's patients' enthusiastic remarks. Eventually, she appears beyond a door, in the background, and states: "here I am". At this point the camera cuts twice, to focus on the head doctor, first, and then on her. Anna's extreme close-up reveals her (formerly) tormented expression has now turned into a look of serenity (figure 2.10). Her redemption has finally occurred.

The Nun's Story

The Nun's Story offers significantly different viewpoints and characters.

Unlike Anna, Gabrielle has a strong personality, which enables her to approach life more resolutely and, ultimately, make different decisions. Gabrielle also differentiates herself from Anna as a female type and through stardom. Hepburn epitomises a kind of “classic” femininity, still hugely acclaimed by women especially. She conveys the idea of a “non provocative” beauty, for being “a lady” and “not sexy” (Moseley 2002: 15). Hepburn's female type thus differs widely from Mangano's. Hepburn's distinctive image marks Gabrielle's portrayal not just as a nun, but also before taking and after giving up the vows, as I shall discuss.

Hepburn's cult status has persisted across time and generations from the 1950s to today. This phenomenon's significance has recently called scholarly attention, with Rachel Moseley (2002) a key reference. Moseley sees in Hepburn's “indefinable something” what has contributed to her continued acclaim (p. 35). Moseley discusses this particular feature in terms of flexibility, drawing on Dyer's (1979) notion of “structured polysemy”, and finally argues that crucial to Hepburn's timeless appeal is her multi-faceted embodiment of femininity, spanning both “modern, pared-down trousers and fairy-tale tiara” female types (p. 216). According to Moseley, this combination of traits not only enabled Hepburn to compete with the different cinematic models of womanly beauty emerging in the 1950s – from Brigitte Bardot and Marilyn Monroe, whose type of femininity recalls Mangano's, to the less overtly sexual Doris Day, whose appeal is closer to Hepburn's – but has secured her approval as a model amongst women until now. Moseley explains that Hepburn's iconicity happened to match the ideals of women growing up in the 1950s and 1960s, advocating the values of modernity and social acceptability. Concurrently, 1990s women, too, welcomed Hepburn's mode of

femininity, as they could see in it a different expression of female beauty, whose essence many consider as timeless (p. 216). The series of interviews Moseley conducted with a group of Hepburn's female fans, encompassing different generations of women involved in the so-called "Hepburn phenomenon", corroborate the scholar's argument.

The Hepburn/Day pairing is here worth considering briefly, since it provides clues about Hepburn's everlasting success by contrast. Another key Hollywood actress of the time, Day founded her success on characters overall similar to those Hepburn played. Eric Braun (2010) sees in Day the epitome of the "girl next-door", the "perpetual virgin" and "Miss Goody Twoshoes". Moreover, like Hepburn, Day often played working women. Nevertheless, Day has not become an everlasting "cult" icon like Hepburn. Molly Haskell offers an interesting reading in this respect. Contrasting Dwight MacDonald's (1969) identification of Day's niceness as a trait that should make "most American mothers [...] pleased [...] if their daughters grew up to resemble" the actress (p. 110), Haskell (1987) argues that Day's figure is "not reassuring" and even "uncomfortable", continuing: "it is [...] Audrey Hepburn, whom most mothers want their daughters to grow up to be like", and "it is with Audrey Hepburn [...] that young girls, anxious about their sexuality, most strongly identify" as Hepburn "evoke[s] the freedom of adolescence, the androgynous state where a girl identifies with her father as much as with her mother" (pp. 267-8). The Hepburn fans Moseley (2002) interviewed confirm Haskell's view: "the appeal of Audrey as a star [...] is not about sex" since "in *Audrey-land* a woman can be attractive, well-dressed, successful and herself without being continually reduced to her

sexuality” (p. 188).

Like all major stars, Hepburn enjoyed all-inclusive media popularity, through press, advertisement, gossip and other forms of communication. Though this contributed to boost her social visibility, it also favoured the exploitation of her image in stereotypical terms, to the point of obscuring her artistic value. *The Nun's Story*'s case is emblematic in this sense, as several commentaries, including *Films in Review*'s (1959 10, 6), attest: “Audrey Hepburn [plays] with such complete understanding of the full content of each scene that her performance will forever silence those who have thought her less an actress than a symbol of the *sophisticated* child-woman” (p. 353).

In most cases, the film was positively assessed, and even counted among “the great performances of the screen” (*Films in Review* 1959 10, 6: 353). *The NY Herald Tribune* (1959 19) defined the production as “a sensitive study of a young woman's struggle to be obedient to the bells”, adding “this is no tear-jerker but a strong, persistent searching out of the pertinent elements in a notable struggle of conscience”. One point of interest was precisely Hepburn's performance. *Films in Review* (1959 10, 6) wrote that Hepburn “can [skilfully] project inner feelings of both depth and complexity” (p. 353) and, as *The Daily Cinema* (1959 8182, 22) remarks, “makes us believe both in the girl's burning desire for service and in her inability to conform to severe convent discipline” (p. 11). Thus, as in *Anna*, emotionality and deep inner conflict are the story's predominant melodramatic features, which Hepburn's character reflects both in her lay and monastic incarnations.

Gabrielle's desire to become a better person is the prime reason for her

struggle: this is apparent from the film's beginning, when she leaves her family to join the monastic order. Despite her resolve – here mainly conveyed through dialogue – her facial expressions betray the contrasting feelings affecting her soul: though she is enthusiastic about her prospective life as a nun, the idea of leaving her relatives, and her father's scepticism about her religious calling upset her. Close-ups emphasise her disquiet, highlighting her tense posture and uneasy gaze (figure 2.11). This type of portrayal, where the sense of uneasiness is perceivable but not extreme, conveys her struggle before entering the convent. Hepburn's performance, and in particular the use of her face, enable the audience to fully sympathise with Gabrielle's feelings. This is a clear example of the performance of affect, as discussed by Gibbs (2010).

Once Gabrielle becomes Sister Luke, a higher degree of tension marks her representation.



Figure 2.11



Figure 2.12

The relationship between Gabrielle and religion is more complex than it appears at first. On a narrative level, the religious experience may be said to hold an overall positive value, enabling Sister Luke to understand her real vocation in

life, and eventually attain the personal betterment she aimed for. By contrast, from a melodramatic angle, the Catholic order seems a negative force, determining Sister Luke's crisis, since she sees monastic duties as demanding and often in contrast with nursing duties. The film conveys this through an emphasis, for example, on the Grand Silence rule, which the Order imposes on all nuns. This rule's observance affects Sister Luke's work as a nurse as it hinders communication with patients and doctors. Likewise, fasting, another key rule of the Order, compromises her professional proficiency: in one scene, she faints while assisting Doctor Fortunati, offering a strong visual clue to the incompatibility of religious and nursing duties for her.

While dialogue constantly suggests Sister Luke's uneasiness, expressions render her disquiet strikingly evident. Close-ups highlight Sister Luke's struggle (figure 2.12), showcasing her taut facial features, her rigid posture, bewildered gaze and tight lips. The white wimple framing her face exalts these features further, as it contrasts with her darker face. Significantly, a different type of expression characterises Sister Luke as a nurse: here, she displays a look of serenity, signalling the importance of nursing to her personal fulfilment. Through Hepburn's performance, especially in terms of facial expressions, the audience fully sympathises with Sister Luke's joyful feelings. Again, Sister Luke's white clothing exalts her darker facial features (figures 2.13 and 2.14), now relaxed and brightened by a happy disposition. Composition also contributes to emphasising Sister Luke's figure: in one case, her upper body is literally framed by a window (figure 2.13); in the other, she stands between Doctor Fortunati and another man, and two poles on either sides further bound her figure (figure 2.14) – which gives

even more prominence to her already central position in the frame.



Figure 2.13



Figure 2.14

As we know, Sister Luke's actual identification of nursing as her true vocation only occurs towards the film's end. The closing sequence, depicting her parting from the convent, is crucial in this respect. It conveys a sense of rebirth: the protagonist's evocation of all her contrasting emotions over the last 17 years of her life eventually culminates in a deep sense of serenity. Gabrielle abandons her religious effects in a gloomy room. The only sounds are her footsteps. Pathos comes to a high point when the main door opens, letting a beam of light enter the cell. At this point the camera cuts to Gabrielle: she stands, motionless, while looking at the exit, and her expression suddenly appears relieved (figure 2.15). Then, she solemnly moves towards the doorway, passes through it, and resolutely heads towards the "luminosity" of her new life (figure 2.16).



Figure 2.15



Figure 2.16

In different ways, Anna's and Gabrielle's diversely-alike profiles achieved considerable success. Despite a “plot, in which the motivations of the characters are frequently unbelievable” (*Monthly Film Bulletin* 1952 19, 226: 153), *Anna* was largely appreciated by the public, and succeeded “in beating the record set up by [Mangano in] *Bitter Rice*” (*Daily Film Renter* 1952 26, 6331: 10); it was Lattuada's major commercial success (Lattuada 2008), both in Italy and abroad (Landy 2008: 113). *The Nun's Story* gained 8 Academy Award nominations, including Best Picture, Actress and Screenplay based on the adaption of Kathryn Hulme's 1956 novel. For Nolletti (1994), this film “still remains not only Zinnemann's finest achievement [...] but it contains Audrey Hepburn's greatest performance in the most demanding role of her career” (p. 82). In spite of all this – Nolletti also remarks – neither scholars nor the audience has ever given *The Nun's Story* the attention it deserves. Amongst the possible reasons for this is the film's religious subject matter (pp. 82-3).

In terms of “total star text” – the actress’s study across all her diverse media manifestations, as Dyer indicates (1992: 17) – this opinion finds substance in

Moseley's (2002) interviews with Hepburn's female fans. Among the few women mentioning Zinnemann's work, one stressed her dislike of the actress in the film precisely "due to her Catholic upbringing" (p. 113). This is significant, especially if one considers that the same interviewee saw in Hepburn's "non-sexual charm" a prime motive for admiration. Given that "the incompatibility between the ideas of 'Audrey Hepburn' and 'sex'" ends up being one of Hepburn's most appealing features (Moseley 2002: 113), one major point of the question is thus likely to concern her unusual, religious role in the film.

Hepburn's distinctive elegance is a fundamental trait of her iconicity, and a key element in her international media success. Her image in austere ecclesiastical vestments thereby contrasts with her star persona's fashionable aspect. Hepburn's unconventional outfit may thereby be one reason for the audience's indifference to or, in some cases, disfavour of Hepburn's performance in the film. The same argument, however, does not apply to Mangano's Anna: Anna's religious character complies with Mangano's distinctive sexual aura, as confirmed by *The Monthly Film Bulletin* (1952 19, 226): the protagonist's "spirituality [...] serves as an effective contrast to heighten her sensuality – this latter quality being Silvana Mangano's main claim to consideration as an actress" (p. 153).

Examining the issue from a different perspective, national and cultural backgrounds may have also influenced the two films' impact on the public. With regard to *The Nun's Story*, *The Hollywood Reporter* (1959) underlined that the film attracted the American non-Catholic public especially, due to its "compulsive curiosity [...] concerning what goes on in a convent" (p. 3). The questionable treatment of some aspects of Catholic monastic life – such as the Order's

imposition of strict rules, reflected in the harsh Mother Superior's figure – is thus unlikely to have provoked disapproval in the American audience. The same does not apply to the Italian public, especially by virtue of the place of Catholicism in 1950s Italy. In fact, *The Nun's Story*'s harsh depiction of convent life had an overall unfavourable weight on Italians' appreciation of the film. “Cronaca con l'obiettivo's” commentary in the newsreel *La Settimana Incom* (1959) is indicative. Following *The Nun's Story*'s premiere in London, the report's focus was not really the film, but Hepburn's “small issue” at the premiere party – “a speck in the beautiful actress's eye” – due to which “she risked not to be able to watch her film”, with her closest female friend commenting: “even so, she would not have missed that much!”. This latter remark is the only critical comment about the production, and suggests evident disfavour.

The influence of Italy's and America's cultures is identifiable also in the diverse values that *Anna* and *The Nun's Story* attribute to religion. In Italy, where the influence of Catholicism on society – including healthcare and nursing – has long been apparent and strong, Anna's character equates her spiritual life to her professional one. In the American *The Nun's Story*, monastic rules clash with the profession's demands – in a way that, arguably, is inadequately justified – and are, thus, the main reason for Gabrielle's inner struggle. Giving up the vows is the only solution to her predicament.

America's and Italy's different social histories have been influential, too, on the construction of Gabrielle's and Anna's characters – resolute Gabrielle epitomising a “strong” individual as opposed to frail and “weak” Anna. In this respect, it is for example significant that Italy granted voting rights to women in

1946, thus 26 years after the US – which suggests Italy’s backwardness with regard to America in terms of women’s (social) recognition, at least at the time. Further – and here, especially noteworthy – evidence of the two countries’ out of sync social developments can be also found in their respective nursing histories. During the 1950s, when both *Anna* and *The Nun's Story* were released, the US’ “Federal Government became involved in promoting the nursing profession throughout the newly formed ‘Division of Nursing [...] [which] advanced healthcare services for all Americans as more focus was placed on providing quality nursing services (Judd, Sitzman & Davis 2010: 143-4)”. A radically different situation characterised Italy, living through “a poor period” in terms of national health policies, overall: national healthcare was administered by home affairs, and was not assigned its own specific Ministry until 1958, that being the current Italian Ministry of Health – placing it low down in the national policy pecking order (Manzoni 2010: 148).

A closer look at Italy’s history of nursing – which has seen a much slower development of the profession than America – can further facilitate the understanding of Anna’s and Gabrielle’s contrasting representations and trajectories. Pascucci and Tavormina (2012) highlight that the evolution of nursing in Italy was different from that of the other countries, Britain and America especially (p. 21). They stress that in Italy the church continued for a long time to exert its influence. Until the beginning of the 20th century, the ward’s management in Italian hospitals was regularly assigned to religious nurses. Lay people – defined as either “nurses” or “attendants” – corresponded to a small minority (p. 11) and “had no defined role”, besides being described as “illiterate, dirty, rude

and nasty [...] lacking in any type of professionalism as well as the most elementary knowledge of medicine” (Fiumi 1993: 31).

There was thus a stark distinction between religious and lay nurses, with the former leading figures, and the latter subservient and unqualified. Similarly, early 19th century British reformers of nursing adopted a critical approach to figures like the “drunken and dissolute” Dickensian handywoman nurse Sairey Gamp in *Martin Chuzzlewit* (1844). Brian Abel-Smith (1960) highlights that, at the time, it was indeed “still not unusual for reformers to overstate the evils they hope[d] to correct” (p. 5) (See also: Rafferty 1996: 9-22).

The Italian church supported the disparaging views on lay nursing described above, as seen in Pope Pius IX’s 1849 *Nosceitis et Nobiscum* encyclical. The latter harshly criticised the lay nurses that, in that same year, Princess Cristina Trivulzio di Belgiojoso (1808-1871) was in charge of within the Roman *Comitato di Soccorso* (“assistance committee”). Belgiojoso and the nurses she led were defined as shameless women, who “had cast divine and human affairs into confusion” and “grew enraged enough to interfere with the work of the respected clergy of the city, disregarding the authority of their superiors, who, on Our orders, were attending fearlessly to religious matters.” (Roman Catholic Church 1849).

Shortly before the encyclical’s publication, the *Comitato di Soccorso* itself was closed, and Belgiojoso had to escape from Italy (Pascucci & Tavormina 2012: 7-8). She was a highly cultivated and progressive aristocrat from Milan. Pascucci and Tavormina (2012) identify her as both one of the “noblewomen who was committed to the opening of the first schools for nurses in Italy” since “at the

time the state was uninterested in the issue”, and as a precursor of Nightingale’s ideas (p. 21), based on a 1849 project of “a house of assistance, where women would be hosted and instructed to work in hospitals” (quoted in Rossi 2002: 154).

As the prompt closure of her *Comitato di Soccorso*’s attests, Belgiojoso could never attain her goal – unlike Nightingale. On the other hand, the all-female committee recruited 300 women (Del Maso & Venditti). This is noteworthy, especially in the light of women’s inferior social condition in 19th century Italy, which Belgiojoso described in her *Della presente condizione delle donne e del loro avvenire/Of Women’s Condition and of their Future* (1866). Other Italian women offered nursing aid in this historical phase, e.g. Laura Solera Mantegazza, Elisabetta Michiel Giustiniani, Teresa di Teresa Manin, Teresa Mosconi Papadopoli, and the so-called “women of Castiglion delle Stiviere”. Later on, in 1908, the Italian Red Cross corps of *crocerossine* (“volunteer nurses”) was also founded.

Non-Italian women, too, provided nursing support during Italy’s insurrections. Amongst the most famous is the English Jessie White, who took part in the political fights for Italy’s unification, and to whom Giuseppe Garibaldi assigned the management of a field hospital in Palermo during his “Expedition of the Thousand” (1860). Anne Summers (1988) argues: “the cause of Garibaldi and Italian unification aroused passionate enthusiasm” in the UK, and “after 1859 many British women expressed their solidarity with the Italian cause by organising medical aid for Garibaldi’s troops” (p. 132). White played a leading role in this, along with other prominent Englishwomen, including Florence Nightingale.

Neither the important work of voluntary women, nor the Italian government's reconsideration of the country's healthcare following the unification war period – and despite healthcare reform eventually promulgated in 1888 – changed much in terms of nursing organisation. Although some minor progress in terms of training was registered from 1896, especially thanks to Amy Turton, a Scottish nurse living in Florence, the first official reference to nursing training only appeared in the 1909 Reform of Mental Hospitals (Pascucci & Tavormina 2012: 13). Significantly, a main aim in medical congresses of the time was “unhinging the traditional, atavistic hegemony of religion over hospitals” (Archivio Centrale dello Stato 1910-20 601), with nuns judged as “technically unsuitable for assistance” and “unlikely to be subject to any improvement”, since they did “not exclusively depend on hospital directions” and “were practically limited by the numerous constraints imposed by their religious orders” (Fiumi 1994: 31).

Turton's contribution to nursing development in Italy was complemented by the work of other foreign nurses, in particular Grace Baxter (of English parentage), the German Anna Celli, and the British Dorothy Snell and Helen Ruth Hamilton. These nurses promoted training also through the foundation of various nursing schools, the first of which in a Neapolitan Hospital (1896). On their side, the American nurses Lavinia Dock and Isabel Stewart (1958) wrote extensively on Italian nursing, underlining: “neither of these pioneer efforts grew large, nor fast” still “they served as a demonstration of modern nursing in Italy” (p. 201). Indeed, in 1908 the Italian moderator Rita Sciamanna wished the Italian government would work towards hospital nursing's improvement, “as it was long

ago in England, and is now being in France”, adding: “England and Italy look at the nurse from reverse standpoint. In England to be a nurse raises you; in Italy it degrades you (in public opinion)” (quoted in Turton 1908: 396-8).

The outbreak of WW1 led to more professional assistance to be provided. In 1918, the Italian government created a “Commission for Nursing Reform”. However, it was not until 1929 that the Royal Decree (RD) n. 2330, aimed to assign training schools’ regulation for both lay and religious nurses to the government, was promulgated. Before this decree, the advent of fascism (1922) greatly impacted Italy. Fascism enhanced nursing’s centuries-old vocational and missionary components. Nurse Maria José of Belgium, who would later become the Queen of Italy, had to join the fascist party (PNF) as a statutory requirement for finding employment. As a PNF member, she became CRI’s National Inspector (1939). Carlo Lizzani’s television film *Maria José, l’ultima regina* (IT, 2002) narrates her story.

The fascist period, however, also witnessed prolific reform activity in healthcare – which WW2 interrupted, and which would slowly restart only in the 1960s. In 1940, the nursing *mansionario* (“job description”) was approved. Outlining nurses’ duties, it required skills and scope, and drawing a distinction between “professional” and “generic” nurses, the *mansionario* still described nurses as merely executive figures, fully dependant on doctors and confined to hospitals (Pascucci & Tavormina 2012: 214). This *mansionario* remained in force until 1974, when the 225/74 Republic President’s Decree introduced a new *mansionario*.

Italy’s phase of reform inactivity following the 1940 *mansionario*’s

promulgation saw, on the one hand, the fall of fascism (1943) and of the monarchy (1946) and, on the other, the advent of Christian Democracy (DC) as the country's leading party (1946-1994), supported by the Vatican (Giovagnoli 2011). The close relationship between the DC and the church ultimately secured the latter's control over the newly established Italian Republic. Lattuada's *Anna*, filmed in 1951, is thus an emblematic product of the period: its protagonist's characterisation reflects the church's influential role in Italian society, as well as the latter's low estimation of – not to say, disinterest in – nursing.

Overall, Italian nurses welcomed the 1974 *mansionario*, which gave value to the relational aspects of nursing care, expanded nursing activities beyond hospitals, and acknowledged nurses' didactic role and competences within specific medical disciplines, thereby also conferring on nurses more autonomy. On the other hand, such precise description of nursing ultimately limited its modernisation, preventing nurses from using their knowledge and skills to the full. The 1974 *mansionario* was only superseded (by law n. 42) in 1999. Besides revising the terms of nurses' field of action, this law cancelled the distinction between “principal” and “auxiliary” healthcare professions – with nurses included in the second group (Pascucci & Tavormina 2012: 214-6).

The 1990s were a crucial decade for the development of nursing in Italy: the decade inaugurated a new era of reforms, and witnessed the profession's academic recognition. In 1990, Italian universities made the first steps towards offering a proper nursing degree; in 1992, nursing was officially established as a university subject. In 1999, the MURST decree designed a nursing university degree of both first and second level, which came into actual force in 2001, and

was harmonised with European standards in 2004. By comparison, the first academic setting for nursing education in America dates back to 1899 at the Teachers' College of Columbia University (Teachers College of Columbia University); in 1956, the same university's School of Nursing instituted the first American master's degree in clinical nursing (Columbia University School of Nursing). Meanwhile, in the UK, the first university diploma in nursing was set up by the University of London in 1922 (for post-qualification nurses); in 1960, the University of Edinburgh initiated the first bachelors degree for undergraduates.

As this account of Italy's nursing history has highlighted, the latter diverges deeply from that of America and Britain. Even if relatively little scholarship to draw on in this area is available, still the American and British nurses' writings on Italian nursing have here offered ready-made evidence of this. Further details on Britain's and America's pioneering role in the profession shall be offered in the next section, on the recruitment melodrama – and, with regard to Britain, have been also provided in chapter one. I argue that the discrepancies underlying nursing in Italy, Britain and America entail different approaches to and considerations of the profession, which are in a number of ways reflected in cinematic representations. In Italy, first comes the Vatican's influential role, its declared hostility towards lay nurses, and the powerful role it continued to exert on Italian society at the time of *Anna's* release, through the DC government.

The religious question also helps explain the reason for Gabrielle's and Anna's diverse depictions and trajectories. The American Zinnemann made his protagonist opt for only one of the two vocations available to women: nursing. As a highly valued profession, nursing accordingly is the only possible answer to

Gabrielle's fulfilment and, not least, the only reward for her long-lasting ambition. By contrast, Lattuada found in Anna's two-sided vocation – religious and professional – the only acceptable solution to her melodramatic struggle. Considering Anna's efforts to redeem herself, a sole career in nursing was likely to be judged as not fulfilling enough – and even as “degrading”, to use Sciamanna's words (quoted in Turton 1904: 398) – for the Italian public.

Supporting this hypothesis is another Italian melodrama whose protagonist is a nurse, Guido Brignone's *Noi peccatori* (“We sinners”, 1953). From its title, the film offers evidence of Catholicism's influence on post-war Italian society and, through its dialogue, of Italian people's low opinion of the nursing profession. Back in Naples following the war, atheist ex-soldier Stefano (Steve Barclay) falls in love with nurse Lucia (Yvonne Sanson), a very religious and talented woman, who is often criticised for doing her job, which everybody deems unworthy of her. However, when Stefano discovers that Lucia has a second job as a singer in a nightclub – ignoring that she does this to pay for the surgery he previously had to prevent his blindness – he impulsively leaves her. Desperately chasing Stefano, Lucia is run over by a bus, which causes her paralysis. In this apparently hopeless set of circumstances, only Our Lady of Pompeii's miracle is capable of bringing a resolution: in the presence of Stefano, who has meanwhile converted, Lucia can suddenly recover from her infirmity.

The notion of national and cultural influences on the cinematic depiction of nurses can be illustrated further in the case of British film. Although British cinema seems distinguished by an absence of melodramas centred on religious nurses – a notable exception is Michael Powell and Emeric Pressburger's *Black*

Narcissus (UK, 1947), an award-winning melodrama about a group of Anglo-Catholic nuns working in a remote mission in the Himalayas, one of whom provides nursing aid. Nursing is a marginal theme in this film, unlike religion, which is central. That said, the way the film treats religion is markedly different from *Anna*. In the latter, as we saw, religion means redemption. By contrast, *Black Narcissus* emphasises the “repressed desires of nuns [...] in its depiction of young women torn between duty and passion”, Mark Duguid (n.d. a) argues, adding: “Powell and Pressburger’s delirious melodrama is one of the most erotic films ever to emerge from British cinema, let alone the repressed 1940s [...] a taut melodrama of unusually fierce passions and barely contained erotic tension”.

Despite its erotically suggestive character, in Britain and America *Black Narcissus* “never directly challenged the strict standards of the censors” (Duguid n.d. a); that was, however, not the case in Italy. In order “not to offend the Catholic Church and its militants”, the Italian censor did not even authorise the film’s dubbing. The ecclesiastical consultant would have later allowed the film’s release, although only under the condition that its “visuals and dialogue were adapted for the Italian public” (“Narciso Nero”). *Black Narcissus*’s different reception in Britain and America, on the one hand, and Italy, on the other, once again points to culture’s influential role on the three countries’ diverse representational trends and orientations when it comes to the depiction of nurses.

By boasting among its eminent citizens Florence Nightingale, nursing in Britain especially has always claimed and received public attention and respect, a tendency that – as we saw – is similar to America’s but very different to Italy’s. Perceptions of nursing are thus reflected in film, both in terms of productions

dedicated to the profession and of representations. In particular, British films tend to offer an overall favourable and reassuring – if ambiguous – image of nurses. Within the melodramatic genre, these ideas apply to a series of films that I define as “recruitment melodramas”, and which I examine in the following section.

2.2 Nurse, woman and professional: “recruitment melodrama” in *Four Girls in White* (US, 1939) and *The Feminine Touch* (UK, 1956)

From the 1930s up to the end of the 1950s, British and American cinemas produced a number of melodramas about nurses whose narrative and style arguably are close to those of the recruitment film for nurses, namely either a documentary-style or a fictional approach whose goal is propaganda, that is to persuade the spectators to follow specific political views, or to guide their own opinions or behaviour (Bennett 2002). Although these productions’ role had been prominent in Britain and America since WW1, “the Second World War saw an even greater commitment to film as a medium of propaganda”, witnessing “the resources of entire film industries made available to wartime governments” (Reeves 1999: 6).

The account above fits with the numerous American and British recruitment films for nurses I have scrutinised, released between 1918 and 1980, and of which *Life of a WAAC* (UK, 1918), *Nurse!* (UK, 1940), *Girls in White* (US, 1941), *The Friend’s Ambulance Unit* (UK, 1941), *The Gentle Sex* (UK, 1943) *The Army Nurse* (US, 1945), *A Friend of the Family* (US, 1949), *Wings on her Shoulders* (UK, 1956), *While Angels Watch* (UK, 1959), *There is No Place Like Home* (US, 1977), *Sister Greatheart* (UK, 1980), *QA* (UK, 1980) are representative examples.

A survey of these films enables me to foreground their most common features. First, they are usually “shorts”, motion pictures whose running time is 40 minutes or less, including credits (The Academy of Motion Pictures Arts and Sciences, Rule Nineteen). Narrative is conventional, revolving around a limited number of themes that include: the profound meaning of being a nurse, following Nightingale’s example; the hard work required and rigid rules to be observed as both nursing students and professionals, with a special emphasis on training in the first case; the gratification associated with a passionate commitment to the vocation; the possibility of enjoying a rewarding personal life. Settings are confined to a restricted number of locations: the nursing school, the hospital ward, and a set of indoor and outdoor venues either related to sport, shopping or social relationships. Props evoking Nightingale’s image are recurrent, as portraits, statues or lamps. Costumes are bound by convention, although the style of the nurse’s uniform and dress varies depending on when the film was made and on the respective fashion trends. The same tendency affects nurses’ makeup: the closer to the 1970s the more extravagant.

Interestingly, these elements are also displayed in about 15 of the British and American melodramas of the 1930s, 1940s and 1950s I have seen. Among the most representative are Irving Cummings’s *The White Parade* (US, 1934), S. Sylvan Simon’s *Four Girls in White* (US, 1939), Charles Barton’s *Parachute Nurse* (US, 1942), Maurice Elvey’s *The Lamp Still Burns* (UK, 1943), Philip Leacock’s *Life in Her Hands* (UK, 1951), Pat Jackson’s *The Feminine Touch* (UK, 1956), and Cyril Frankel’s *No Time for Tears* (UK, 1957). These productions’ idiosyncratic character, combining melodrama’s distinctive traits with the

characteristic elements of the recruitment film for nurses, as well as their relevance within my corpus of melodramas about nurses have determined their choice as subjects for this section.

Before proceeding with an analysis of these films, however, three points are worth stressing. First, what distinguishes these melodramas from others about the nursing profession released over the same period – i.e. George Stevens's *Vigil in the Night* (US, 1940), Mark Sandrich's *So Proudly We Hail* (US, 1943), and Richard Thorpe's *Cry Havoc* (US, 1943) – is the crucial emphasis placed on training. As we will see, the depiction of training is a foundational feature of the recruitment melodrama for nurses. Secondly, several of the 15 films I have categorised as recruitment melodramas, such as *The Lamp Still Burns* (UK, 1943) and *Life in Her Hands* (UK, 1951), were officially promoted by governmental campaigns aimed at persuading women to start a nursing career. Because of this, such productions are less relevant to my analysis, which is instead aimed at examining the recruitment melodramas unmarked by explicit propagandistic aim – namely, the majority of the films I have listed in this category. Third, it so happens that the first examples of recruitment melodramas in cinema history were produced in America during the 1930s – almost two decades before Britain's first recruitment melodrama without government funding, *The Feminine Touch*, and nine years before the Ministry of Health's promotion of *The Lamp Still Burns*.

Several reasons justify the production of recruitment melodramas first in America and, then, in Britain. Julia Hallam (2000) highlights: “in the late 1940s there was considerable American investment in film production in Britain”; accordingly, “the British film industry, as well as the British cinema audience,

was heavily influenced by and familiar with the American product” (p. 33). Assuming that the connection between the two film industries played a role in the development of the recruitment melodramas, other factors intervened. One is the Hays Code, regulating Hollywood's films from the mid-1930s until the late 1960s.

The Code was activated in 1934, one year after Franklin Delano Roosevelt's “New Deal”, the series of economic programs through which the president aimed to face the US’ Great Depression, started in 1929. Giuliana Muscio (1996) highlights: “the New Deal was a powerful modernising mechanism”, since it saw in the concept of communication, in the interaction between political and social spheres, a possible vehicle to economic recovery. In this scenario, the cinema industry had a relevant role, and “the better films program” advocated by Will H. Hays is a clue in this respect (p. 3), to which Muscio adds:

Hollywood cinema reconciled viewers with social reality ideologically, by confirming the nucleus of the American dream, rationally, by adapting behaviour to social rules, and emotionally, by gratifying viewers in the erotic-affective sphere and supplying them with a mythical screen on which to project and rediscover themselves (p. 74).

Richard Maltby (2003) underlines that preserving the cinema industry from the rebuke of the most powerful institutions of the time – e.g. the church, politicians and social workers – was also a reason for Hays's control of film

programming (p. 62). The Code advocated models of righteous conduct, imposing on any Hollywood product the observance of “moral standards [...] correct standards of life”, and “law – divine, natural or human” (p. 594). As a result, sexuality and violence were banned from films, in order to safeguard the putatively fundamental values of family, religion and justice. In relation to women’s depiction, this had two main consequences: the “support of the holy institution of matrimony”, and – of special relevance to my topic here – that of the new image of “working women”, in opposition to the sensual vamps of the 1920s (Haskell 1987: 21-31).

Defined by know-how, intelligence, and hyperactivity, “the working woman [...] was more at ease pursuing a career, whether for its own sake or as a pretext for finding a husband, than languishing in a love nest”, Molly Haskell (1987: 92) argues. Though neglecting questions of race – which I will come back to – Haskell’s account overall addresses the nurses’ portrayals considered in this section. An example of the career-oriented woman is, for instance, nurse June Arden (Loretta Young) in *The White Parade* (1934): she eventually abandons her beloved Ronald Hall III (John Boles) in favour of the profession. The idea of nursing as a means to securing a husband distinguishes, instead, nurse Norma Page (Florence Rice) in *Four Girls in White* (1939) and nurse Pat Martin (Delphi Lawrence) in *The Feminine Touch* (1956), as I will discuss shortly.

Besides the Hays Code, other factors contributed to the production of recruitment melodramas. To start with, women constituted the majority of filmgoers both in America (Walsh 1984: 37) and in Britain (Thumim 1992) in the 1940s; this tendency, as Andrea Walsh (1984) underlines, encouraged the film

industry to offer “more programming designed for women” in order to “please its female audience”. Interestingly, Walsh mentions a film about nursing to support her argument, Mark Sandrich's *So Proudly We Hail* (1943), as a typical example of an “ad campaign for women's film [...] targeted specifically to women's clubs and associations” (p. 37). Centred on a group of military nurses sent to the Philippines at the beginning of WW2, *So Proudly We Hail*, while not being a recruitment melodrama – insofar as it lacks the emphasis on training – was nevertheless likely to have been made with a view to promoting the profession amongst women. Clues in this respect are not only the topic and the timely release during the war, but also the three acclaimed Hollywood stars – Claudette Colbert, Paulette Goddard and Veronica Lake – as protagonists.

In 1943, when *So Proudly We Hail* was released, Hollywood dedicated two other films to the 1942 conflict on the Philippine Bataan Peninsula: Tay Garnett's *Bataan*, and Richard Thorpe's *Cry Havoc*. *Bataan* is a tribute to American Army soldiers; *Cry Havoc*, like *So Proudly We Hail*, pays homage to the Army nurse corps and, in turn, features stars Margaret Sullavan, Ann Sothorn and Joan Blondell in the lead roles. The three films' simultaneous release only one year after the Filipino conflict, as well as their exceptional casts – *Bataan* also includes Robert Taylor – strengthen the hypothesis of a recruiting goal underlying their production, as part of Hollywood's general war effort. From this perspective, *So Proudly We Hail* and *Cry Havoc* are thereby also definable as melodramas aimed at nurses' recruitment, though not of the same narrative type as the “recruitment melodramas” examined below: again, they lack the emphasis on training that, instead, characterises my case studies in the recruitment melodrama category.

One last aspect to consider in discussing the emergence of the recruitment melodrama concerns the convergence of documentary realism and the so-called melodrama of everyday life in 1940s British cinema, since the resultant filmic current, the “documentary-narrative melodrama”, shares several elements with the films I deal with in this section (See: Street 2009: 70-2). Referring to Andrew Higson (1984), Sarah Street (2009) states: “documentary-narrative melodramas” tend to concentrate on “varied groups of characters – often representing different classes, generations and regions”; they show “episodic narrative structures; an address to the spectator [...]; an aesthetic characterised by an iconography of the workplace and leisure activities, and montage editing” (p. 65).

Interestingly, one of the films Higson (1984) labels as “documentary-narrative-melodramas” is Frank Launder and Sidney Gilliat's *Millions Like Us* (UK, 1943), a propaganda production about women's support to wartime Britain that is usually associated to nursing-related *The Lamp Still Burns* (UK, 1943) – both films being released in 1943 and promoted by governmental campaigns. *The Lamp Still Burns* focuses on Hilary Clarke (Rosamund John), who leaves her job as an architect to undertake nursing. Enrolled as a trainee at Queen Eleanor's Hospital, she falls in love with factory owner Laurence Rains (Stewart Granger), a former client who has been rushed to the hospital where she works, and who reciprocates her love. Several issues hamper their romance but, primarily, the celibacy imposed on Hilary as a trainee. By the end of the film, Hilary decides to put her career before love, leaving Rains to join her fellow nurses at work.

The similarities between *Million Like Us* and *The Lamp Still Burns* are stark. Thus, it might be that under the concept of “documentary-narrative

melodramas” Higson (1995) might refer to the same type of films I discuss here. If this were the case, his identification of 1940s “documentary-narrative melodramas” as “key texts in the formation of a distinct British film genre” (p. 262), would be partly invalidated: America engaged with this melodramatic sub-genre almost a decade before Britain, with recruitment melodramas like *The White Parade*, *Parachute Nurse* and *Four Girls in White*. Thus, the sub-genre’s real root is American, and not “distinctly British” (Higson 1995: 262).

Amongst the films I consider representative of the recruitment-melodrama sub-genre, two are of particular interest to my study: *Four Girls in White* and *The Feminine Touch*. Besides being emblematic of the melodramatic sub-category, these two films also offer effective examples of late 1930s/early 1940s and 1950s cinematic styles, and of these decades’ approaches to the representation of women in Britain and America.

Four Girls in White was released in 1939, over a period that also witnessed the heyday of the Woman's Picture and the so-called “box office poison” episode. The latter is symptomatic of the progressive re-conceptualisation of women’s roles and values in society, which found in the motto of Roosevelt's “New Deal” its origin, and which the progressive change of screen women – from vamps to working women – reflects. On 3rd May 1938, *The Hollywood Reporter* published an uncredited full-page advertisement – which Harry Brandt on behalf of the Independent Theatre Owners Association seemingly wrote – opening as follows: “Wake up Hollywood producers! Practically all of the major studios are burdened with stars – whose public appeal is negligible – receiving tremendous salaries necessitated by contractual obligations”. In the list of actresses “whose dramatic

ability is unquestioned but whose box-office draw is nil”, as Brandt put it, were Mae West, Edward Arnold, Greta Garbo, Joan Crawford, and Katharine Hepburn, as well as Kay Francis and Marlene Dietrich.

Besides being involved in the episode, Hepburn is of interest here as she calls attention to the Office of War Information’s control on Hollywood Studios under Roosevelt’s presidency, promoting wartime government propaganda through Hollywood stars’ support (Bernstein 2000: 9). Increasing their public visibility, both politicians and film celebrities benefited from these joint appearances on American screens. However, those who gained most advantage from the media phenomenon were the Roosevelts, reaching a broader audience (than the merely political one) and therefore widening their government’s fame and consensus (Muscio 1996: 40). An opportune example in this respect is the short film *Women in Defense* (1941), which encouraged female civilians to undertake one of the several professions – including nursing – available through the Civilian Defense Office. This film features Eleanor Roosevelt and Katharine Hepburn as, respectively, screenwriter and narrator.

Four Girls in White is emblematic of this period’s cinematic trends. The first clue is the film’s recruitment aim, with Florence Rice playing the protagonist. With her ten-year career on stage and in film inaugurated in the mid-1930s, Rice was part of the Hollywood star system during Roosevelt’s presidency; and when *Four Girls in White* was released, she was at the peak of her success (while she was never an A-list star). Rice’s depiction of trainee Norma is also typical of the period, as an example of the code-era heroine. In contrast to the so-called sex goddesses of the 1920s and early 1930s – i.e. Greta Garbo, Marlene Dietrich, Mae

West and Jean Harlow – Norma epitomises a more down-to-earth individual, a working woman, determined to succeed in her career in order to fulfil her personal ambitions, including to find a husband. Norma's credo is identifiable in other female characters of the time, i.e. Rosalind Russell's Hildy in Howard Hawks's *His Girl Friday* (1940), a brilliant reporter who, despite many obstacles, eventually attains both her professional and romantic goals. Concurrently, Norma's "semi-unsympathetic" gold-digger nature, as *Film Weekly* (1939 21, 551) commented, also recalls the darker tones of 1940s female characters, "women of dubious ethics [...] who were as likely to be found on the wrong side of the law as not" (Haskell 1987: 191).

The Feminine Touch, instead, is a typical 1950s British melodrama. Its representation of the central female characters in this respect reflects post-WW2 Britain's feminine ideals. As Christine Geraghty argues in *British Cinema in the Fifties* (2000): "the constructions of womanhood at play in the 1950s focus on four main areas: motherhood, sexuality, paid work and consumption" (pp. 30-1). *The Feminine Touch*'s aspiring nurses are emblematic of this set of values. Among the elements conveying their 1950s look *mise-en-scène* plays a key role. Nursing uniforms, hospital wards and kitchenettes, respectively evoking the ideas of labour and domesticity, alternate with fashionable dresses and appealing dating venues, mirroring the period's ideals of beauty and entertainment. The film's Technicolor photography contributes to the images' appeal: bright colours enhance the nurses' figures, perfect makeup – especially apparent in their shining red lips – and hairstyles. An example of the glossy display marking most 1950s British films (Holmes 2005), *The Feminine Touch* appears as a paradigmatic

cinematic product of the decade. The film's "Britishness" is also reflected in its representation of the working class. As chapter four will detail further, since the 19th century Britain has identified in the upper/middle-class a metaphor for respectability, as opposed to the villainous working class (Skeggs 1997). This idea has since been figured in many British films. *The Feminine Touch* offers an illustration of this notion in the guise of the lazy, rude and unkempt, exaggeratedly "working class" female cleaner. The latter is unfavourably contrasted to the hard-working and "proper" nurses, who represent a spectrum of social classes, thus making them embody a *de facto* middle-class identity, even when they come from the working class.

The following analysis will mainly concentrate on *Four Girls in White* and *The Feminine Touch*. Nonetheless, references to other recruitment melodramas, like *The White Parade* (1934), will also be made. Besides being one of the first recruitment melodramas in the history of cinema, *The White Parade*'s importance to the study of this melodramatic sub-genre lies in the value its protagonist confers on the nursing vocation, which differs from both *Four Girls in White*'s and *The Feminine Touch*'s. As I will discuss, this discrepancy is particularly relevant in relation to *Four Girls in White*, released only a few years after *The White Parade*, and produced in the US as well.

As the title suggests, *Four Girls in White* is the story of four young women – Norma (Florence Rice), her little sister Patricia (Ann Rutherford), Gertie (Una Merkel), and the young widow and mother Mary (Mary Howard) – and of their different life experiences once enrolled on the American Maitland Hospital's programme for nurses. As the school's matron stresses in her welcoming speech

to the probationers, each one has her own motivations for attending the course, but there is only one valid reason to stay: love of service, following Nightingale's example. Protagonist Norma, instead, sees her training period principally as the opportunity to meet a wealthy man to marry. Unlike her three colleagues, whose enthusiasm towards the profession is on the whole genuine and further motivated by the desire to pass the first-year exam, Norma's observance of duty is primarily aimed at attracting the attention of brilliant resident physician Stephen Melford (Alan Marshal). Nonetheless, she is eventually upgraded as a junior nurse, and only then does Melford decide to invite her on a date. However, their relationship is destined to finish prematurely: Norma is unable to accept Stephen's commitment to medicine. Her next "quarry" is rich patient Robert Maitland, a descendant of the hospital's founder. Although evidently attracted to Norma, Robert decides not to inform her about his release from the clinic: when she realises this, she chases him by passing her patient to Mary, who leaves her duty to cover for Norma. Despite her exemplariness as a nurse, Mary is punished for her negligence, and denied her long awaited vacation, the only chance for her to spend time with her daughter. Instead of confessing her responsibility for Mary's dereliction of duty, Norma accepts Robert's invitation to his father's yacht, with her sister Patricia. During the cruise, Robert and Patricia fall in love: interpreting this as a punishment for her misbehaviour, Norma decides to return to the hospital. At this point, the film reaches a new melodramatic height: an insane patient Mary (whose name clearly associates her with the idea of sanctity) was assisting kills her. All nurses resent Norma for her misdeed, which caused Mary's death and her child's second loss of a parent. In despair, Norma decides to resign,

but her request is declined: she is asked to join an emergency team and succour the victims of a train wreck. Norma can finally prove her value as a nurse: amid a raging storm, she risks her own life to assist the injured. Her devotion to duty regains Melford's love and proves her a worthy nurse.

A somewhat similar scenario characterises *The Feminine Touch*. Susan Richards (Belinda Lee) is a new student at St. Augustine's Hospital's nursing school, and is assigned a shared bedroom with Pat Martin (Delphi Lawrence) and three other women. The matron (Diana Wynyard) introduces them all to the programme, stressing how hard and yet satisfactory a nurse's life is, and warns the probationers about the difficulties and personal crises they may experience over the training period. Her words prove prophetic: the initial stumbling block is the first term exam, which all the five women eventually pass; yet, much greater troubles come with nursing practice, discouraging most trainees to the point of even making them consider resigning. Nonetheless, working in a hospital also means collaborating with remarkable physicians: Susan is immediately aware of this. She falls in love with Jim Alcott (George Baker), a gifted and ambitious young doctor who is about to leave for Canada to improve his medical expertise. Although he claims to be against marriage, his acquaintance with Susan eventually brings him to change his mind. Accordingly, Susan's motivation for completing her studies starts wavering compared to her desire to follow Alcott overseas. Yet, she finally realises how important the nursing vocation is for her, and thus deems sacrificing her love for the profession to be the right choice. A somehow similar destiny is emancipated Pat's though, in her case, the relationship with Doctor Ted Russell (Christopher Rhodes) soon culminates in a secret

wedding – secret because it contradicts the school's rules: student nurses must remain unmarried. When Pat decides to inform Susan and her three other friends about her marriage, the matron calls her into her office, demanding an explanation for her recurrent misconduct. Susan sneaks into the meeting, too, and supports Pat over the interview. When Pat reveals her marital status, the superior surprisingly demonstrates understanding: sympathising with the feelings that had motivated Pat's choice, the matron suggests it may be possible for her to finish the training. This encourages Susan: in the final scene, she rushes into Alcott's arms.

On a narrative level, *Four Girls in White* and *The Feminine Touch* are very similar. Both films start with a group of young women – displaying a range of (white) female types – enrolling in a nursing school. The matron's inaugural speech follows, exalting the value of nursing but also the great efforts it demands. The probationers' first obstacle is the exam, although nursing practice also causes discomfort. The trainees' uneasiness reaches an even higher level when romance becomes crucial to the plot: love contrasts with student nurses' rules and duties. By the end of both films, the romance/work conflict finds a solution: the nurse can find a balance between the two spheres, thereby complying with the professional and feminine ideals distinguishing nurses' cinematic portrayals over the decades considered (Kalisch & Kalisch 1982: 607-10, Hallam 2000: 34). Before examining questions of reception and historical/cultural influence, it is important to clarify how these films convey the characters' claimed embodiment of professional and feminine values.

2.2.1 Nurses as professionals

The recruiting character distinguishing *Four Girls in White* and *The Feminine Touch* elevates the concept of nursing skill to one of the films' core motifs. To this end, besides the importance of dialogue – from the matron's welcoming speech to the probationers' on the profession's distinctive character, to the verbal interaction between nurses and doctors about medical issues – image plays a pivotal role. On a visual level, the sense of expertise arising from these films is constructed by tracing the aspiring nurses' progressive professional growth, from their first day of training up to the official attainment of the title. Through this realistic approach to training the audience can appreciate the diverse skills a nurse is required to learn, the difficulties she faces, her sacrifices and responsibilities – all tasks that, by the end of the film, the nurse can successfully achieve, by proving herself equal to the job.

Four Girls in White offers the first visual clue in this respect in the sequence depicting nursing students during their opening day of training. Here, the idea of professional capability is suggested through an overview of the diverse skills the probationers, although still evidently inexperienced, have to acquire. Framing and editing reinforce the sense of accomplishment and rigour that mark images. Medium close-ups and close-ups of the head nurse giving instructions to the students (figure 2.17) quickly alternate with images describing the diverse exercises assigned to them (figure 2.18). Lively music further emphasises the tempo and rhythm sustaining the alternation between this set of shots. These elements' combination makes the scene particularly captivating, and accentuates the overall sense of diligence and dexterity defining the nursing profession.



Figure 2.17



Figure 2.18

Looking at the scene more closely, we see how Miss Tobias (Jessie Ralph), the nurse in charge of the training programme, is emblematic of the notion of duty. Several close-ups, highlighting her stern look and expression, magnify her leading role (figure 2.17). Long shots, illustrating her dominating position in relation to the class (figure 2.19), also emphasise her leadership: she stands opposite the probationers, who are arrayed in two straight rows – which recalls a squad of soldiers standing to attention while facing their superior. These framing choices further highlight the head nurse's authority, reminding the audience of the necessity of observing rules – a core duty of any professional nurse. At the same time, Miss Tobias's quasi-military manners together with her older looks and aggressive approach to men (as the film reveals through her relationship with a medical intern) also mobilises the derisive battleaxe stereotype introduced in chapter one. Most senior nurses in *Four Girls in White* and *The Feminine Touch* actually embody this misogynist figure, shouting at trainees, and often appearing more authoritarian and bad mannered than men, for example the kind porter in *The Feminine Touch*. This illustrates the films' misogynist inflection of the older

female figure, in contrast to the protagonists played by young and glamorous actresses.

Turning back to the sequence in question, the depiction of nursing skills is another pivotal element, conveyed through the representation of the trainees' accomplishment of Miss Tobias's directions. The greatest emphasis on nursing practice comes when the camera starts quickly alternating close-ups of the head nurse with different images of the probationers at work. The insistent focus on the diverse types of abilities the trainees are asked to learn (figure 2.18), and the different medical equipment with which they have to become familiar (figure 2.20), configures the concept of nursing practice as paramount, making the rather unsuccessful outcome of the students' first day of training a detail of secondary importance. Thus, the scene's dominant motif is, again, professional skills as a constituent aspect of nursing.



Figure 2.19



Figure 2.20

The Feminine Touch includes a similar scene, especially in terms of editing, although here the emphasis is on the challenging nature of the profession, requiring hard work, patience and sacrifice. The idea of hardship is enhanced,

here too, through a series of close-ups, portraying senior nurses, probationers and patients, which alternate according to an increasing rhythm. Also in this case, the increasing pace confers a special drawing power on the images. Initially, the focus is on the one-to-one relationship between different pairs of senior and aspiring nurses – close-ups of the former, directing their subordinates' actions (figure 2.21), preceding either close-ups or medium close-ups of the trainees, who meekly assent (figure 2.22). This particular type of framing enhances the characters' countenance and expressions. The head nurse communicates ideas of leadership and strict authority through her austere gaze, firm facial expressions, and tight lips (figure 2.21). By contrast, trainee Susan's submissive demeanour (figure 2.22) is perceptible from her downturned look, and overall expression of apprehension – which ultimately transmit a sense of strained subordination.

Susan's state as described above becomes more intelligible if one considers the head nurse's attitude in the light of Pam Smith's 1992 study of the emotional labour of nursing. We saw in chapter one that what makes "qualitative difference" to both "patients' lives" and nurses' own experience in the ward are "the little things or gestures of caring". The latter, Smith argues, "are difficult to capture and slip by unnoticed in the daily routines"; however, their "absence [...] is stark evidence of the lack of care" (pp. 1-2). Significantly here, Smith sees in the head nurse/ward sister "the key person who set the tone for the caring climate" (p. 8) as "student nurses [feel] better able to care for patients when they [feel] cared for themselves by the trained ward staff and their teachers" (p. 135). From this perspective, the head nurse's mainly austere behaviour in *The Feminine Touch* – as well as in *Four Girls in White* – might be judged as imperfectly supportive of

student nurses' formation, since it lacks those little gestures of caring that should also form part of nurses' training.

On the other hand, Smith also underlines that the defective, "caring-less" approach to nurses' education – which can be said to define the head nurses of these films – is actually deep-rooted in real nursing: "nursing leaders exhort nurses to care, but their definitions are limited because they fail to take into account the emotional complexity of caring" (p. 135). Thus, ultimately, it could be argued that the screen head nurses in the films examined here offer a realistic depiction of how nursing training is carried out.

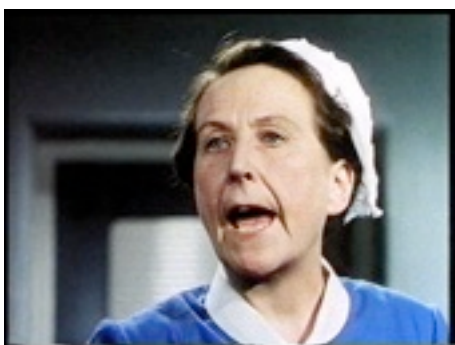


Figure 2.21

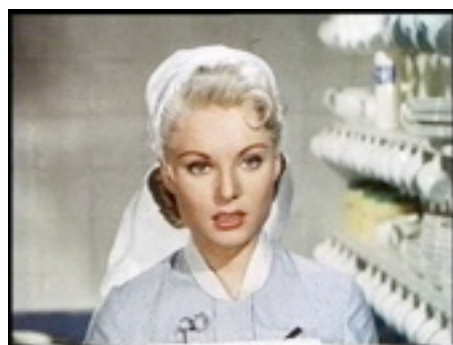


Figure 2.22

Returning to the scene in *The Feminine Touch* where the nurses are commanded by senior figures and patients, we see the pace quicken following the series of close-ups and medium close-ups illustrated above, and further close-ups show experienced nurses and patients, all insistently calling: "nurse!" (figure 2.23). This rapid sequence of shots concludes by cutting to the image of a probationer, sitting on a sofa, exhausted (figure 2.24): this stops the scene in its tracks, both symbolically and on a narrative level, a fade out transition visibly

closing the whole sequence. The rapid series of alternating images, all portraying caricatures of patients desperately asking for help, and the senior nurses' proud and stern behaviour, emphasises by contrast the portrayal offered in the final shot: an exhausted, young nurse, whose downcast eyes, seated posture and momentary sigh suggest a state of physical and mental fatigue. This emphasises that hardship and challenges are also at the base of a nurse's life.

In this respect, it is noteworthy that all the scene's patients are women – which as we have seen is rare in nurse films. This configuration might be judged as misogynist, insofar as women ultimately appear as guilty of causing stress for the nurses. As Hallam (2000) comments on the scene in question: “all the voices and faces are female. But in the narrative structure of the film it is the doctors who command nurse attention” (p. 61) – which further underlines the film's patriarchal inflection. Hallam sees the latter as overwhelming and diminishing the nurse's role, “confined to the kitchen and caring for doctors” (p. 61). Although much in the film undoubtedly supports Hallam's view, I would argue nevertheless that the screen and narrative space the film dedicates to nursing skills – both in terms of duration and accuracy – is a rare attempt to elevate the nurse as a skilled practitioner.



Figure 2.23



Figure 2.24

Further to this, and as the examples described by figures 2.18, 2.19, 2.20, 2.23 and 2.24 especially suggest, there is some attempt to represent the value of professional capability in both films. At first, the audience is introduced to the concept of professional nursing through an overview of its “essentials”, in terms of skills, duties and general hardship – which the aspiring nurses initially manage with evident difficulty. Real expertise is indeed something that comes with time, as both productions’ protagonists confirm.

One of *The Feminine Touch*’s first accounts in this respect comes when Susan, working on a night shift, has to face an emergency by herself. Although initially hesitant, her first aid proves to be crucial in saving the patient's life – as Doctor Alcott, who has meanwhile reached her in the ward, proudly remarks. It is noteworthy that the patient in question, an old man, is depicted as a tragic victim – unlike the female patients in the scene examined above who were all grumpy and/or ridiculous old women, confirming again the underlying patriarchal and misogynist representational system of *The Feminine Touch*.

Turning back to Susan's performance, her own insights in treating the suffering man, as well as her subsequent, dedicated assistance to Alcott, are eloquent testimony to her professional growth. On a visual level, framing and lighting support and emphasise her progress. A three-quarter shot captures Susan's know-how in curing the patient (figure 2.25): she is the frame’s focus and dominates the sick man, on the lower foreground. When she switches on a prop light, both her figure and the patient's stand out against the darkness; yet, the

greatest attention is still on her: an intense beam of light illuminates her head, giving prominence to her beauty (which fits within 1950s canons, as we shall see) but also to her skill and dexterity, as she administers oxygen to the patient.

Alcott's arrival changes the perspective, the physician becoming the new focus of the image. The light over the patient's bed now illuminates him, central in the frame. Susan, instead, stands on the left, in the gloom, and shows her back profile to the camera. Here, she complements Alcott's intervention: the only part of her body that is illuminated is her hand, promptly providing Alcott with medical instruments. Overall, images and dialogues clearly convey the idea of Susan's growing professional skills and competency, but also her place in the medical hierarchy. Significantly, the sequence ends with Susan prey to emotionality crying in relief on Alcott's shoulder. The emphasis on this spectacle of "feminine" weakness, immediately following the display of her professional skills, illustrates particularly well the film's complex and even contradictory gender ideology.



Figure 2.25



Figure 2.26

The ideas of skill and accomplishment also mark a number of the scenes in

Four Girls in White. The most emblematic example, in this respect, is towards the end of the film: Norma joins an emergency team and rescues people in need by risking her own life. This heroic action is meaningful: it expresses the notion of self-sacrifice, one of the nursing credo's hardest and yet distinctive principles. In Norma, all this becomes even more significant: her former misbehaviour had led to her intention to resign and, earlier, to her colleague Mary's death. Norma's plan to resign fades precisely when she can demonstrate to herself and her colleagues that she is still worthy of her qualification. This motivates her to keep faith with her chosen assignment.

In the scene under discussion, the high-risk situation Norma operates in further magnifies her skilful support to Doctor Melford. She volunteers to rescue the survivors of a train wreck, the locomotive having plunged into water. Although Melford promptly reaches out and helps Norma, initially she is alone in the wreckage: surrounded by water, she removes injured people from the debris by herself. Norma's privileged position in the frame enhances her leading role in the operation. A medium shot illustrates her caring for a child (figure 2.27), the two of them being in the foreground of the image. This disposition reduces Melford's role: he is in the background, with Norma partly obscuring his profile. Norma is the real focus: besides her central position, her white uniform makes her stand out of the darker surroundings.



Figure 2.27



Figure 2.28

When Melford starts treating the young victim, the emphasis instead shifts towards the idea of teamwork. The scene presents a series of shot-reverse-shots of Melford and Norma, with close-ups of Norma's hand passing surgical instruments. This image not only effectively conveys the notion of collaboration, but also enhances Norma's relevance to Melford: in saving the victim's life, the two professional figures are complementary.

This calls attention to the concept of hierarchy, since the scenes examined convey the nurse/doctor relationship in different ways. In *The Feminine Touch*, Alcott's arrival in the ward depreciates Susan's role, the selective use of lighting practically obscuring her profile in favour of Alcott's full-frontal figure. Norma and Melford's case in *Four Girls in White* is the reverse, Norma being always the central focus of the image and often hiding Melford's body, in the background. This scene also plays a key role in the film's narrative: it represents Norma's last but spectacular opportunity for redemption as both a woman and a professional.

Considering the hierarchical question from a gender perspective, one may argue the titles of both films trivialise their protagonists as nurses. *Four Girls in White* defines its nurse-protagonists as "girls", notwithstanding their being of age.

The Feminine Touch identifies nurses neither as such nor as young women, but through the rather frivolous concept of “feminine touch” (“gentle”, in some versions of the film), which downgrades these professional women’s value to a mere gesture – albeit pleasurable, for those benefiting from it. Evidence, however, contradicts this viewpoint: although, as the next section will demonstrate, I acknowledge that “conservative” feminine ideals characterise the depiction of these nurses, nursing skill is nonetheless given prominent screen time, as we saw.

One last example of nursing professional capability comes from *The Feminine Touch*, and concerns the management of emotions – a key aspect of nursing carework. The feminist sociologist Hilary Graham (1983) defines caring as a combination of labour and love, doing and feeling. Similar views are offered by nurse sociologist Nicky James (1989), although she chooses to define caring simply as labour, for managing emotions with ill/dying people and their families “has [...] connotations associated with labour as productive work but also the sense of labour as difficult, requiring effort and [...] pain. It demands that labourers give something of themselves [...] not just a formulaic response”. Indeed, the risk in carework such as nursing is replacing the affective domain of love and empathy with “social distance” (Graham 1983: 15). These accounts are echoed in the encouraging discourse the matron in *The Feminine Touch* addresses to her momentarily despondent trainees and, subsequently, are reflected in Susan’s affective approach to a young patient.

The matron states that nursing is “being close to birth, death, grief [...] It’s holding your fingers on the pulse bit of humanity [...] It’s when a woman comes [...] sick with fear, and you [...] dispel that fear by your compassion and practical

understanding”. She then offers the students a practical example, regarding the management of emotion during a colostomy operation. Following a technical description of the procedure, she concludes: “you must do this matter-of-factly, without the least sign of revulsion, because the patient is waiting for that very sign [...] It is you who gives him courage: that is nursing”. In line with Smith’s (1992) argument, the matron here does “set the tone for the caring climate”: noticing her students’ distress, she shares her experience, explaining how she has “laboured emotionally for patients” (p. 8). Her supportive role not only motivates the students to continue with training, but also permits them to learn how to manage emotions as nurses.

Susan’s relationship with Jessie, a child cardiac patient, is emblematic of the above scenario. Despite her young age, Jessie is aware of her state, which surprises Susan. Enquiring about Tommy, a seriously ill friend of hers in the same ward who is about to undergo high-risk surgery, Jessie starts crying. She is afraid he will die soon – a destiny she knows she may share. This prompts Susan to get closer to and embrace the young girl, who lies in bed. With a reassuring tone of voice, Susan says: “Jessie, look, don’t cry: Tommy’ll get better soon, I know he will! [...] They’re doing wonderful things nowadays!”. Then, a loving smile on her face, the nurse maternally wipes away her patient’s tears (figure 2.29). Susan’s emphatic manners make Jessie calm down, indicating that the nurse has managed the difficult emotional labour of the moment.



Figure 2.29

The above examples demonstrate that the depiction of professional nursing skills, which includes the management of emotions, is a crucial element in *Four Girls in White* and *The Feminine Touch*. Another pivotal aspect of these melodramas is the exaltation of femininity. The two elements combined result in the nurse's overall appealing portrayal, which supports the films' recruitment aim – for example the depiction of Susan's interaction with the young Jessie (played by child star Mandy Miller) rather than the colostomy patient, offers a more attractive and palatable display of emotional management for a wide audience. In what follows, I examine the representation of *Four Girls in White*'s and *The Feminine Touch*'s nurses as icons of femininity.

2.2.2. Nurses as icons of femininity

The exaltation of femininity is clearly at the centre of *Four Girls in White* and *The Feminine Touch* even before romance becomes a crucial aspect of the plot. In this regard, a first noteworthy point is the young probationers' depiction: they represent a range of female types, distinguished by well-defined physical and ideological traits. In *The Feminine Touch*, especially, concepts of class and region

reinforce these diversities, with the “Irish” and the “working class” nurses counterpoising their middle-class English colleagues – who, systematically, play the leads. Thus, the innocent and romantic protagonist, Susan, played by the star Belinda Lee, is blond, beautiful and glamorous, reflecting the typical beauty of 1950s female stars, dressed in “New Look” fashion; the other leading character, smoker Pat, is the opposite of (and thus, complementary to) Susan, as a brunette, who is forceful and emancipated; charming Maureen (Adrienne Corri) is the red-haired and green-eyed Dubliner; Ann (Henryetta Edwards) is the plain, ex-public school character; and Liz (Barbara Archer) is the messy but bubbly and sympathetic working class girl from East London (the latter however is carefully distanced from the slovenly cleaner discussed above, the “bad” working-class woman, whereas Liz is the image of the aspirational working-class). This micro-diversity of female types clearly aims at supporting the films' supposed recruitment goal, facilitating the female viewers' identification with these nurses.

It should however be noted that, as is almost always the case with representations of nurses, the feminine microcosm displayed in these films is completely white. As already discussed in several contexts, there are various reasons – cultural, ideological and historical – for the parallel “nurse/white”; however, all of them ultimately concern the western idea of respectability. In *White* (1997), Dyer foregrounds the dichotomy “white-good-pure/black-bad-impure” as distinctive of western society and its Christian bedrock. Focusing on British colonialism, Skeggs 1997 sees white as synonymous with respectable; and, in class terms, identifying as non-respectable whoever belongs to the working class, regardless of race: “respectability” only pertains to the upper/middle-class.

Representing the nurse *par excellence*, Nightingale's image clearly encompasses these features, and it is indeed invoked as a model in both *Four Girls in White* and *The Feminine Touch*. In *Four Girls in White*, Nightingale's whiteness even extends to props: the film showcases more than once a white marble statue of her holding, as per tradition, a burning lamp.

Considering these films' recruitment goal, an obvious consideration is: how could these all-white recruitment melodramas appeal to a non-white audience, since they were potentially targeted at the latter, too? In chapter one, we saw that due to the shortage of people willing to do nursing in 1950s and 1960s Britain – the period over which *The Feminine Touch* was released – the country promoted recruitment campaigns in Ireland and the New Commonwealth. Yet, while *The Feminine Touch* explicitly addressed Irish aspiring nurses (through the character of Maureen), this was not the case for the Commonwealth (black) audience. The assumption in chapter one was that the hegemony of white (middle-class) images of nurses in British media fostered black nurses' sense of discomfort and discrimination. This was possibly the case for *The Feminine Touch*'s black audience in the UK (although the presence of black people in the country was not as significant in the 1950s as it would be decades later) but also – and especially – in America, where the film was also released – and the presence of black people was appreciable also at the time.

Similar considerations apply to *Four Girls in White*. I previously stressed that in 1940s America the cinemagoers' majority were women. However, as Stuart Fischhoff and colleagues (1998) referring to Bruce A. Austin's 1986 study stress, the research on moviegoing habits and preferences has tended to

concentrate on white filmgoers – suggesting that the cinema industry identified the latter as its real targets. On the one hand, this observation makes the white perspective adopted in such recruitment melodramas more intelligible; on the other, it also confirms the racist bias underlying (most) western productions.

This assumed, in her account of the reception and consumption of the woman's picture, Gillian Swanson (1994a) argues that feminist theorists have considered the genre's "central female perspective as offering female spectators the pleasure of identifying with active and transgressive female desire" (p. 426). In view of Gledhill's (2007) definition of the woman's picture as a group of productions "aimed at women, about women, drawing on other cultural forms produced for women often by women" (p. 316), *Four Girls in White* and *The Feminine Touch* can be included in the category. Interestingly in this respect, *Four Girls in White* features a female screenwriter, Dorothy Yost, and also Nathalie Bucknall as the second author of the original story on which the film is based, co-written with Endre Bohem. Similarly, *The Feminine Touch* is an adaptation of the novel *A Lamp Is Heavy* by Sheila Mackay Russell, who trained as a nurse in the US (where the film was released with the same title as the book). Moreover, when the British Ealing Studios produced the film, both its nursing mentor and screenwriter were women: respectively, the matron of a London's teaching hospital, and Monica Dickens, one of 1940s/1950s Britain's key writers on professional nursing.

It is likely that the presence of (white) women in *Four Girls in White*'s and *The Feminine Touch*'s production teams had an impact on the two films' overall representation of a female world, and on their emphasis on feminine culture. From

the films' very first scenes, the aspiring nurses' figures embody prevalent feminine ideals of beauty: in both cases, the protagonist is a pretty, blond young woman, arriving at the nursing school and sharing a room with other, equally attractive women. In terms of framing, three-quarter shots enhance their shapely figures, which stylish clothing – respectively characteristic of 1940s (figure 2.30) and 1950s (figure 2.31) fashion – renders even more captivating. When the probationers change into the nursing uniform, the emphasis on their bodies' slender shapes reaches the highest point, the nurses appearing in their underwear.

From a psychoanalytical perspective, these images' value lays itself open to different interpretations. Considering the films' supposedly woman-oriented character, one may argue that these portrayals facilitate female spectators' identification with the protagonists, the latter being embodiments of an ideal (white) femininity. This would also support the hypothesis of the productions' recruiting goal. Yet, especially in light of the films' male direction, the focus on the protagonists' physique could also be interpreted as offering an objectified female spectacle for male pleasure. Drawing on Laura Mulvey's (1975: 1989) notion of fetishistic scopophilia, the physical beauty of the probationers' semi-naked bodies – which Mulvey understands as fetish objects – turns into something reassuring and satisfying for the male gaze, thereby favouring male viewers' enjoyment and advocating these films' identification as patriarchal products. This chapter further explores this point, *Four Girls in White* and *The Feminine Touch* offering several cues for a discussion.



Figure 2.30



Figure 2.31

Turning back to the films, dialogue supports the drawing power of the aspiring nurses' portrayals as described so far, disclosing the probationers' distinctive personalities and lifestyles, and enabling the public to better define their different profiles. In this respect, a noteworthy point is that these films' protagonists often make the spheres of love and career overlap – in line with the traditional and patriarchally inflected representation of the working woman. In *The Feminine Touch*, Pat's objective is benefitting from the training course to find “a five thousand pounds a year husband”; the same aim is Norma's in *Four Girls in White*. By the end, both women are able to fulfil their ambition, though their feelings towards the partners have turned into sincere love. A different position is Susan's in *The Feminine Touch* who, stereotypically, also falls in love with and eventually decides to marry a doctor – although, in her case, this goal is not premeditated.

Unlike the patients, all the doctors featured in these films are men. While this gender configuration is evidently functional to the representation of romance, it also echoes both the social reality of a period in which physicians were mainly men, and a deeply patriarchal view of gender relations (indeed, the male

doctor/female nurse pair still characterises the profession's image in popular culture, when this is less common in real life). The gold-digger stereotype that both films – and *Four Girls in White*, especially – mobilise is also revealing of gender bias. By contrast to the stated ambition to “catch” a doctor expressed by some of the nurses, initially, none of the desirable doctors in the film appear interested in romance. Rather, they focus on their careers and doing research, including going abroad, rather than thinking of (lucrative) private practice. Additionally, while the male doctors appear (unrealistically) untouched by the desire to harass nurses sexually, nurses deploy their sex appeal as “men hunters”. Doctor Alcott and Susan in *The Feminine Touch* partly depart from this configuration: initially, Alcott is criticised for being a womaniser (but this seems restricted to him “using” nurses to get food) and, though not a gold-digger, Susan panders to his whim by virtue of her attraction to him. As we know, Alcott eventually reciprocates Susan's feeling, thereby being “absolved” from his initial misbehaviour.

On a symbolic level, the different characterisations of, on the one hand, Norma and Pat and, on the other, Susan, arguably end up favouring their identification respectively with the “bad” women and the “good” one, the unprincipled ones and the upright one. Momentarily leaving aside this categorisation's questionable ideology, which both films tend to suggest, it is worth noticing that the same binary also tends to affect these women's professional recognition. Besides the love goal motivating their training, what undermines Norma's and Pat's reputation as future nurses is their overall disregard of the rules – including, not least, the reverence for Nightingale's figure. Pat refers

to the “mother of modern nursing” in disparaging terms, using the nickname “Flossie”, whereas Norma bitterly complains to Nightingale’s statue whenever she feels frustrated with her job, especially with regards to disappointment in love. By contrast, Susan’s vocation remains throughout the film, and even prevails beyond romance before the matron’s implicit agreement to condone both. This move elevates Susan to the story’s real heroine, the epitome of the good and upright woman. Her principled conduct is apparent also in relation to love: while Norma and Pat live their romance “against the rules”, exposing themselves to quite a few problems, Susan decides to follow her beloved overseas only with her manager’s consent.

Notwithstanding the distinction between good and bad individuals, by the end the three women share the same destiny, each one engaging with both nursing and romance. This conclusion is presented as the best-case scenario for the characters, the sacrifices and challenges they have endured and overcome during training being finally “rewarded” with a handsome doctor’s love. In view of the moral standards the Production Code imposed, with marriage and family identified as two core principles to advocate in film; and considering the 1950s mentality, seeing in the notion of motherhood the true realisation of any woman, the films’ romantic endings can be described as unsurprising. More generally, as discussed earlier, in the working woman film career is ultimately identified as less crucial to women’s fulfilment than love (marriage and family): without the latter, in a patriarchally structured society, a woman cannot really define herself as fully realised.

Thus, in these films, too, an outcome depicting a sole career in nursing

would appear as not rewarding enough in itself to the female protagonists' real fulfilment. Outside of marriage, the films seem to say, the aspiring nurses' future can never be truly satisfactory. Irving Cummings's *The White Parade* (US, 1934), however, offers a counter-argument in this respect. The first example of recruitment melodrama I have found, *The White Parade* tells the story of trainee June Arden (Loretta Young) at the Mitchell Reed School of Nursing. Revolving around the sub-genre's distinctive themes, the film is very similar to *Four Girls in White* and *The Feminine Touch*, with the exception of its conclusion: June chooses to give up her love with wealthy Ronald Hall III (John Boles), and happily dedicate herself to the profession.

Considering that *The White Parade* was released five years before *Four Girls in White*, and that both films are American, June's choice cannot be underestimated. America's nursing history offers possible grounds justifying the two films' different narratives. Prior to *The White Parade*'s release, one of American nursing's main goals was elevating the standards of nurses' education: a challenging objective to pursue, mainly because of the hardship of the Depression era (Roux & Halstead 2009: 13). The promotion of figures like June, demonstrating that sacrifice is worth making as a secure job will be the reward, was crucial to encouraging people to undertake the profession. In their account of *The White Parade*, the Kalischs (1982) stress: "in the depression years of the 1930s, such idealism and self-sacrifice meant a great deal [...] The viewing public came to understand that the nursing profession espoused high ideals and demanded rigorous self-discipline" (p. 607). In 1939, when *Four Girls in White* was released, the threat of WW2 reconfigured American nursing's priorities. The

main problem to manage was the shortage of nurses, which was addressed through extensive recruitment campaigns (Roux & Halstead 2009: 17). In this light, figures like Norma, for whom nursing is not only a means to self-sacrifice, but also represents the opportunity to enjoy both a love and a professional life, were likely to attract more women to the profession.

These questions inevitably encourage careful consideration of *Four Girls in White* and *The Feminine Touch*'s second, central motif: romance. Having already accounted for the latter's relevance within these productions' plots, I will now examine how romance is conveyed visually. The few occasions in which the story's background is set outside the hospital are love-related scenes. For example, Norma's dating venues are a restaurant (figure 2.32) and a yacht (figure 2.34), whereas Susan and Pat are respectively invited to a romantic day in the park (figure 2.33) and to an exhilarating night of dancing (figure 2.35). Considering that these women's "date" is almost always a doctor, the choice of alternative settings to the ward for their love stories is meaningful: it suggests that, beyond vacations, a nurse's life is not confined to a hospital, but spans diverse and often entertaining venues – a relevant message to the productions' recruiting aim.



Figure 2.32



Figure 2.33

In view of the above, a further question worth rising is that both films identify in the physician the nurse's “perfect husband”. Although numerous melodramatic plots about nurses include romance with doctors, this does not usually apply to the traditional recruitment film. Thus, *Four Girls in White* and *The Feminine Touch*’s representation of this cliché mirrors patriarchal views, bearing out the idea that female viewers will be attracted to nursing mainly because of the promise of a wealthy husband the profession may hold for them. Leaving aside their profession, the handsome actors playing the nurses' fiancés help towards the overall appeal of the scenes in which they feature, thereby playing a role in the films’ recruitment aim.



Figure 2.34



Figure 2.35

Turning back to the films, characters and sets are crucial to the dating scenes’ appeal. Among the aspects conveying the characters' attractiveness, costumes play a key role: glamorous dresses and suits replace uniforms; fashionable hats or finely done hair supplant the nursing headgear. The couple’s loving attitude is also a captivating feature, communicated through the characters'

tender expressions and gestures, as well as through their position in relation to each other. *Mise-en-scène* heightens all these elements. In *The Feminine Touch*, medium close-ups of Pat and Doctor Russell (figure 2.35) give prominence to their expressiveness, enhancing their romantic gazes and affectionate behaviour. The shallow focus of the background enhances this perspective, since it makes the couple stand out from the dance hall's crowd. Likewise, the three-quarter shot of Susan and Doctor Alcott in the park (figure 2.33) showcases their bodies – the frame's focus, occupying most of its space – and, thus, romantic poses. The lovers lie together on the ground, tenderly embracing, and one delicately caresses the other's leg – a configuration conveying the idea of mutual love.

Four Girls in White also employs three-quarter shots to enhance the idea of romance. Here, composition is key to directing attention to the couple. On the yacht, Norma and Robert sit down on two semi-circular sofas (figure 2.34), circumscribing the couple within a central space in the frame and, thus, giving prominence to their figures. The film's black and white photography is also deployed strategically: the nocturnal scene's darkness contrasts with the lighter tones of the lovers' skin and with Robert's white jacket. Composition plays a crucial role also in the establishing shot of Norma and Doctor Melford at the restaurant (figure 2.32). Here, the focus on the couple mainly depends on the latter's central position in the frame; however, scenic elements complement and enhance this effect. In particular, the window and the secondary characters in the background and, in the foreground, the objects on the table, strategically delimit the space around the lovers.

The representation of femininity and of (conservative) womanly values,

such as love and marriage, evidently characterises both films. Romance, especially, is a core feature. However, the latter is also a prime cause of the protagonist's struggle, since it ends up in opposition to the nursing vocation, because of the profession's rules and duties. The conflict between love and career can however be resolved when the nurse is officially allowed to engage with both. In patriarchal fashion, *Four Girls in White*'s Doctor Melford grants this simply by virtue of his love for Norma. Likewise, in *The Feminine Touch*, approval comes from Doctor Alcott and his colleague Russell, but also – and surprisingly – from the matron. We saw that the latter distinguishes herself from other senior nurses in the film by not being harshly authoritarian and, rather, emphatically supportive of the students – as the ideal head-nurse should be, according to Smith (1992). The permission she grants Pat (and Susan) to proceed with a nursing career despite their marital/engagement status is a complex gesture – it means her showing her modernity by acting “against the rules”, but also drawing on her own romantic history in a conventional way. Matron intimates that, as a young nurse, she had to leave her beloved doctor because of her career, something she deeply regrets – suggesting that, ultimately, she disagrees with placing the profession above romance. I would argue that the true reason for matron's “open-mindedness” also concerns how the recruiting goal was embedded in patriarchal ideology: considering the conservative mentality of 1950s Britain, promoting a nursing career that hinders romance and family objectives would not have been appealing for an audience of young women/potential prospective nurses.

The prominence of both professionalism and romance in *Four Girls in White*'s and *The Feminine Touch* has been the key aspect underpinning my

selection of these films: the two spheres' finely balanced combination is what determines this type of films' special status as recruitment-melodramas, with the nurse's inner conflict resolved as soon as equilibrium between career and love is found, through her engagement with both. This, as we saw, does not apply to traditional melodramas like *Anna* and *The Nun's Story*, or to other recruitment melodramas like *The White Parade* and *The Lamp Still Burns*, which finally elevate profession over romance – although this often happens for reasons related to the historical, social and cultural context of the films' release.

Nevertheless, one might judge the recruitment melodrama's eventual reconciliation of the professional and love spheres as contradictory in these films' implicit propagandistic aim, a hypothesis that their often controversial depiction of nursing sustains. Indeed, some elements in *Four Girls in White* and *The Feminine Touch* seem to belittle the nursing vocation. One is narrative, with the eloquent cases of Norma and Mary in *Four Girls in White*: for all her misbehaving, Norma is "rewarded" not only with Melford's love, but also professionally; by contrast, the exemplary Mary commits a professional fault because of Norma, and dies at the hand of a patient – although a minute of silence and a special mention at the base of Nightingale's statue symbolically acknowledge her virtue.

Thus, a more detailed account of 1930s/1940s America's and 1950s Britain's historical backgrounds, when *Four Girls in White* and *The Feminine Touch* were respectively released, may provide further clues to understanding the questions just outlined in relation to these films. To start with, both America and Britain engaged with extensive recruitment campaigns over the periods in

question – America because of the imminence of WW2, and Britain because of the shortage of nurses the same conflict had exposed. As suggested already, grounding nursing propaganda only in duty and self-sacrifice would have been unlikely to attract many women to the profession: hence, the films’ double, professional and romantic, orientation.

In America, the recruitment campaign for nurses also involved the establishment, in 1940, of the Nursing Council of National Defence, thanks to the collaboration of the American Nurses Association and other similar organisations. Together with the American Red Cross, the council was meant to increase student nurses’ numbers and to encourage those who had already graduated to join military service. A crucial achievement in this respect was the Bolton Act in 1942, a programme aimed at quickly preparing nurses for serving in the armed forces. As Gayle Roux and Judith Halstead (2009) highlight, besides offering all students “tuition, housing, uniforms, books and monthly stipend”, the Act revolutionised the way the profession had been conceived up to that point in America, by “mandating the standards of nursing education” and, not least, eliminating “policies that discriminated against students’ gender, marital status, ethnicity or race” (p. 17).

Films played a crucial role in this context, as the wartime propaganda productions the Office of War Information promoted under Roosevelt’s presidency testify. After the Depression, and given the privation the war brought, a successful nursing campaign supposedly had to give prominence to the rewarding nature of the profession: figures like Norma, or Anne Lee (Carole Lombard) in *Vigil in The Night* (US, 1940), whose commitment to nursing not

only means self-sacrifice but is recompensed both in terms of career and love, were therefore likely to be more enticing for a young female audience than solely work-oriented nurse-characters.

The beginning of WW2 did not interrupt nursing propaganda, as films like *Parachute Nurse* (US, 1942), *So Proudly We Hail* (US, 1943), and *Cry Havoc* (US, 1943) confirm. Yet, despite the presence of romance, these films' main concern was stressing the value of the nursing profession. The Kalischs (1982) argue: "even though these [nurses] were attractive women who enjoyed romantic relationships with suitable men, the films emphasised their professional work and *esprit d' [sic] corps*" (p. 609). Lieutenant Janet Davidson (Claudette Colbert) in *So Proudly We Hail* is an emblematic example. A metaphor for unconditional love of service, Janet's courage on the battlefield and great nursing expertise eventually equate her figure with that of a war heroine. Unsurprisingly, this type of image was in line with American nursing needs during the conflict. Indeed, the warfront's increasingly critical situation required the supply of more nurses with higher quality education, not only to improve military nursing, but also to advance the profession's overall standards (Roux & Halstead 2009: 17-8).

Despite the dramatic shortage of nurses in post-WW2 America, recruitment films like those produced over the 1930s and 1940s – focusing on training and on nurses' professional value – were no longer produced. However, nurses continued to feature in numerous American melodramas, mainly as romantic partners of soldiers in war.

A different scenario characterised Britain. Following WW2, the country, too, had to face a drastic shortage in nurses, but the establishment of the NHS

further compounded the situation. The need for nurses was managed through extensive recruitment campaigns that, as we saw, invited women also from Commonwealth countries to join the profession, and work in British hospitals (Dingwall et al. 1988). In this context, the British film industry made its contribution. In 1951, Pat Jackson's *White Corridors* came out, based on Helen Ashton's novel *Yeoman's Hospital* (1945). Nominated for two BAFTA Awards, this melodrama unusually features a female physician as the protagonist (who is in love with a doctor); however, two nurses play a major role. *The Monthly Film Bulletin* (1951 210, 18) praised *White Corridors* for displaying "a quality of professionalism rarely seen in British films" (p. 294). Hallam (2000) concurs, foregrounding: "attention to detail of contemporary debates extends to the portrayal of the nursing staff and their internal relationships with other hospital staff, an aspect of nursing life identified by critics as missing from both *The Lamp Still Burns* and *Life in Her Hands*" (p. 44).

The latter film, sponsored by the Ministry of Labour in 1951, in turn, is a typical example of recruitment melodrama. With an emphasis on training but also on nurse-trainees' pleasurable lives, *Life in her Hands* tells the story of young widow Kathleen Byron (Ann Peters), a former book-keeper at the theatre, who decides to enrol as a trainee at St Oswald's Hospital, where her husband died. As in *The Feminine Touch*, the scriptwriter is Monica Dickens – who is also the author of the autobiographical novel *One Pair of Feet* (1942), on which 1943 *The Lamp Still Burns* is based.

Defined as "probably the single most influential portrayer of professional nursing identity throughout the 1940s and 1950s" (Hallam 2000: 143), Dickens's

own experience as a nurse is likely to have affected the type of nursing portrayals distinguishing post-war British productions – *The Feminine Touch* in particular. Perhaps due to her upper-class origins, as Hallam (2000) suggests, Dickens's writings offer evidence of her discomfort as a wartime trainee, especially due to the hospital hierarchy and the status of nurses themselves. Coincidentally or not, and unlike the other contemporary authors of autobiographical books on nursing, e.g. Joan Ash and Stella Markham, Dickens did not finish her training. Her “detached” and “derisive” behaviour (Hallam 2000: 143) is reflected in her novels’ piquant characters. Her promotion of individual freedom and the attempt at subverting the rules are identifiable in *The Feminine Touch*: as we saw, in the final scene, the matron herself comes to criticise as “out-dated” the celibacy imposed on probationers.

After WW2, Britain’s new welfare state promoted particular ideas of social citizenship. For women, the main concerns were earning a living when necessary, being responsible housewives and mothers, and meeting social obligations (Spencer 2005). These guidelines also underpinned wide media campaigns, spanning films, books, magazines, comics, radio and advertisement: every British woman had to be aware of what being a woman meant, and of how a proper woman should look. The so-called “career books for girls” were emblematic of this period, with nursing among the possible professions to undertake. With regard to the films in this section, it is worth reporting what Belinda Lee (Susan in *The Feminine Touch*), asserted in a 1955 interview, six years before the tragic car accident causing her death: “I want to be successful in my career and to combine that with marriage and at least four children. We have already chosen the

children's names!" (*Films and Filming* 1955 70, 1814: 11).

Against this context, the ideals advocated in *The Feminine Touch* and other 1950s British recruitment melodramas for nurses – for example, Cyril Frankel's *No Time for Tears* – become more intelligible. Released only one year after *The Feminine Touch*, *No Time for Tears* is the story of Margaret (Sylvia Syms), a young nurse at Mayfield children's hospital, struggling with the job and with romance – she loves a doctor. With its Technicolor photography, reproducing the glossy façade typical of Britain's 1950s magazines and melodramas, *No Time For Tears* also shows a prominent cast, including Anna Neagle as matron Eleanor Hammond – Neagle's third performance as a nurse since *Nurse Edith Cavell* (1939) – and George Baker as Margaret's beloved doctor, Nigel Barnes – Baker also playing Doctor Alcott in *The Feminine Touch*.

Apart from several biopics about Nightingale and Cavell – Percy Morgan's *Nurse and Martyr* (1915), Maurice Elvy's *Florence Nightingale* (1915), and Herbert Wilcox's *Dawn* (1928) – and from a couple of productions set during WW1 – for example, Victor Saville's *I Was A Spy* (1933), and Anthony Asquith's *Moscow Nights* (1935) – pre-WW2 Britain does not appear to feature other relevant productions about nurses, except perhaps Carol Reed's *Bank Holiday* (1938). The first example of British recruitment melodrama appears to be 1943's *The Lamp Still Burns*.

Fictional women addressing real ones, by reflecting American and British societies' mentalities and concerns over particular historical moments, form the essence of *Four Girls in White*'s and *The Feminine Touch*: the expression of two nations relying on women's support.

* * *

Although less celebrated than biographical nurses, melodramatic nurses are overall favourably, if ambiguously, featured. Certainly, they appear “more human” than their biographical counterparts: being melodramatic heroines, they are distinguished by deep emotionality, their narrative trajectory is marked by conflict, with romance a recurrent feature. The skill, competence and commitment that derive from their identification as nurses, however, counterbalance and strengthen their emotional side, conferring also on such characters a reassuring aura. In *Anna* and *The Nun's Story*, nursing is what allows the central female protagonist's redemption; in *Four Girls in White* and *The Feminine Touch*, nursing marks the protagonists' “plus-value” as attractive models of (white) “respectable” femininity.

However, exceptions do exist. Nurse Ratched (Louise Fletcher), the co-protagonist of Milos Forman's five Oscar-winning film *One Flew over the Cuckoo's Nest* (US, 1975), is a particularly famous example. The character has arguably become one of the most popular cinematic nurses in global film culture, and has accordingly established as iconic an image of the profession that significantly differs from those I have scrutinised so far. Nurse Ratched (whose very name, presumably, is intended to convey a sense of vindictiveness and authority) is emblematic of the idea of female strength and command in a negative and oppressive manner. Despite being a nurse, she appears to lack any form of empathy for her patients. This provokes the latter's fear and, in the case of Randle Patrick McMurphy (Jack Nicholson), the desire to destabilise not only her affective control as an individual, but also the political power and grip the

institution exerts over the patients' sense of identity and autonomy, through the robotic regimentation of practice and ward routine. Ultimately, the only signifier Nurse Ratched displays in terms of an angel-like figure is her white uniform.

The resulting portrayal is of a mean, narrow-minded, and excessively strict nurse, a quasi-monstrous figure. This idea, running through the film implicitly, is concretely conveyed visually towards the end. This occurs when McMurphy, provoked by Nurse Ratched's behaviour, attempts to strangle her – a violent moment from which she recovers, while the rebel patient, “punished” through strong sedation, finally dies. The scene ends however with an extreme close-up of the gasping nurse, her face purple and her eyes rolled down (figure 2.36). This image, which revels in the spectacle of the “ugly” monstrous woman, is reminiscent of horror cinema even though the film is technically a drama.



Figure 2.36

The depiction of Ratched as “strong” is markedly different from both the exemplary, angel-like Nightingale and Cavell examined in chapter one on the one hand, and the sometimes grotesque comedy battleaxes which I will analyse in chapter four on the other. Unlike the latter, Ratched, though being overbearing

and authoritarian, is young, good looking and not characterised as comic.

The pejorative representation of *Ratched* and its popular impact, however, signal a modification of the affirmative – if ambiguous – depictions of nurses in melodramatic films. This can be seen as a result of the more sexually explicit and, at the same time in some ways, more misogynist cinema of the post-1960s period. The work of European auteur Milos Forman, and starring Jack Nicholson, *One Flew Over the Cuckoo's Nest* falls within the “New Hollywood” cinema that addressed an audience far removed from the predominantly female audience targeted by the melodramas of the 1930s, 1940s and 1950s. Indeed, several actresses (including Jane Fonda) turned down playing Nurse Ratched because of the misogyny of the part (McGilligan 1994: 272).

Closer to us, in the 1990s and the new millennium, more affirmative representations of nurses have been produced, again embodied by major stars: films like Anthony Minghella's *The English Patient* (US, 1996) and Michael Bay's *Pearl Harbor* (US, 2001). Both feature highly emotional nurses – Hana (Juliette Binoche) and Evelyn (Kate Beckinsale), respectively – whose narrative trajectories are marked by romance – the main reason for their suffering – but who, nonetheless, appear courageous and professionally gifted. In Hana's case, especially, nursing expertise is apparent – though romance remains a major element. At the Toronto Film Festival 2014, Binoche confirmed that she had spoken to nurses about their practice before playing Hana, which allowed her to offer a more authentic enactment of the profession (Rafferty 2014). Both Hana and Evelyn are eventually “rewarded” for their tribulations, being both reunited with their beloveds. This suggests that contemporary melodramatic nurses overall

conform to the narratives and the feminine types that traditionally figure in the genre.

Nevertheless, a closer look at the nursing topic reveals that, in contemporary melodramas, the profession has become less crucial. An example in this respect is Briony Tallis (Romola Garai) in Joe Wright's *Atonement* (UK, 2007), adapted from Ian McEwan's 2001 eponymous novel. Attempting to expiate the crime that has marked her life since her early years, Briony, a young woman from a wealthy English family, rejects a place at Cambridge University to dedicate herself to the victims of WW2 as a nurse. Besides constant contact with sufferers, Briony also experiences the hardship of the profession, whose rigour and discipline are reflected in the strict attitude of Sister Drummond (Gina McKee), which the cinematography emphasises.

Nursing is intended as a means to atonement and redemption for Briony – as it was, around five decades before, for the nurses in *Anna* and *The Nun's Story*. Briony's account of the training period illustrates this: "I decided I wanted to make myself useful. Do something practical. No matter how hard I work, no matter how long the hours. I can't escape from what I did". However, the real source of Briony's relief turns out to be not nursing, but the publication of a book, where she confesses the truth about her past crime. Nursing simply plays an auxiliary role to this end, helping her introspection (figure 2.37). Briony's true vocation in life therefore is writing, while nursing is the experience through which she can atone for her fault. This distinction is clear on a visual level, the harsh depiction of Briony's training as a nurse being reminiscent of Zinnemann's portrayal of Sister Luke's hard times in the convent.



Figure 2.37

Through Briony's trajectory, *Atonement* highlights that while nursing's symbolic values (care and self-sacrifice) have survived unaltered in contemporary melodramas, career-wise the profession no longer retains the social recognition it used to. Briony gives up with nursing, opting for a more suitable profession for her. Her assertive behaviour recalls Diane Negra's (2009: 86) description of the "postfeminist working girl" – although Briony only imperfectly fits this pattern.

But besides suggesting a dismissive approach to the value of nursing in contemporary melodrama, Briony's case also introduces a concept that will be recurrent in the next two chapters: hybridity. A key aspect of the representation of nurses in thriller and comedy, their hybrid identity will help me engage with the prevailing scholarly views on the cinematic representation of nurses, which identify these professionals primarily – if not, exclusively – as metaphors for objectification and exploitation.

PART TWO

Reassuring, ministering guardian angels, romantic muses, and glamorous working women – like those featured in the biopics and melodramas I examined in Part One – are not the only icons epitomising screen nurses. Thrillers and comedies, my foci in chapters three and four, respectively, frequently characterise nurses as either mysterious women and dark omens, or sex-kittens and battleaxe caricatures – clearly unsympathetic figures for the audience (the female, especially) to identify with.

Again, David Stanley (2008) provides a useful starting point. Classifying 280 international nursing-related feature films into 19 different plot types, he foregrounds that, following the “romance/love”, “nurse's care” and “nurse at war” themes, the screen nurse's most recurrent representations come under the categories of “sex kitten/object of desire”, “murder/mystery”, “private nurse”, “crime”, and “unbalanced nurse”, with “nurse as detective” and “zombie issues” respectively 15th and last on the list. Stanley also highlights that the most prolific genres featuring nurses as protagonists, after the varied range of films he catalogues as dramas, are comedies and horror films, with thrillers and mystery films respectively 6th and 8th out of the 14 film genres outlined (p. 90).

The importance of thrillers and comedies for the study of nurses on screen makes them the subjects of Part Two. Given the variety of productions involved in the analysis – which includes detective thrillers, film noir, horror thrillers and sexual comedies as sub-genres – Part Two is structured as follows. Chapter three concentrates on the thriller, first focusing on 1930s detective thrillers and 1940s/early 1950s film noir and, then, offering an overview of the representation

of nurses in horror thrillers from the 1940s to the present day. Chapter four deals with comedy, and examines a number of films made between the late 1950s and the early 1970s that fall under the label of “romantic” and “comedian” comedies, and then gives an account of sexual comedies from the 1970s.

The films examined in chapters three and four are selected as follows: America is the prime reference in my account of the thriller, though my analysis of horror thrillers also involves the neglected “spaghetti horror” films from Italy. British and Italian films predominate in my study of comedies, including sexual comedies. This rationale reflects each (sub)genre’s importance within the national cinemas examined here. Steve Neale (2007), a key writer on film genre, locates the thriller’s origins in early 20th century America, arguing that: the “genres of crime [...] often [...] overlap and cross-fertilise in individual cycles and films” nevertheless remaining “distinct” (p. 277). Likewise, Sarah Street (2009: 150) identifies *Carry On* films – examined in chapter four – as canonical examples of British comedy. Similarly, Peter Bondanella (2009) stresses the importance of Italy’s relatively neglected repertoire of 1970s “sexy comedies” – “enormous box office hits within Italy” that “rarely received critical attention at home, or wide distribution abroad” (p. 211).

My film corpus in turn reflects the importance of the different genres (and sub-genres) outlined within each national cinema. Regarding thrillers, Philip and Beatrice Kalisch (1982c) stress: “fifty years ago a unique nursing role, the nurse-detective, made a significant entry into American motion pictures”, remarking, “in numerous films made during the 1930s, viewers saw nurses pursuing murderers, gathering clues, and solving mysteries that baffled the police” (p. 146). On the

representation of nurses in British comedies, Julia Hallam (2000) argues: “within the ‘Carry On’ format [...] nurses became an easy target for ‘toilet’ humour”, being “represented as authoritarian targets of derision [...] or as busty sex objects” (p. 57). A much more sexually explicit portrayal of nurses, however, marks Italian comedies, where “female actresses in various states of undress” are the scene’s real focus (Bondanella 2009: 214).

My account of the representation of nurses in thrillers and comedies offers the first investigation of screen nurses in these particular genres within the Italian context, expands existing studies of American and British films about nurses, in addition to providing a unique cross-cultural and textual comparison of the image of nurses in these three national cinemas.

The films examined in Part Two can also be considered within the “exploitation cinema” category. Accounting for this type of filmmaking, Linda Ruth Williams (2007) argues: “the term ‘exploitation’ [...] has wide cultural currency”, which has generated “differences of opinions about exactly who or what is being exploited”. Yet, in cinema, the term usually indicates “a low-budget form of film-making that ‘exploits’ particular sensational, shocking and taboo subjects [...] in genre feature film or pseudo-documentary format”. In this context, the idea of exploitation therefore attaches to how these films “excite the curiosity [...] or provoke active physical responses” of the audience, which is led to “indulge in guilty cultural pleasures” (p. 298).

The character of exploitation films – often made on a small budget, and with an emphasis on “perverse” topics – has attracted the interest of a certain kind of public, which Williams defines as “fan cultures”, thus bracketing such

productions with “cult cinema” (pp. 298-9). Several of the films I treat in chapters three and four fit this category, especially horror films and sexy comedies. These two types of productions – which, in terms of nurses’ representation, have been particularly prolific from the 1970s onwards – tend to increase traits such as sexuality and transgressive behaviour that are presented as threatening and reprehensible, compared to the image of nurses displayed in the thrillers and comedies of previous decades. The nurse’s sexualised evolution from the risqué nurses of 1960s *Carry On* films to their sexually more explicit counterparts of 1970s, 1980s and 1990s sexy comedies, is an example in this respect.

CHAPTER THREE: Nurses in Thrillers

Defining the thriller is not an easy task; scholars including Martin Rubin (1999) have stressed: “the label *thriller* is widely used but highly problematic” (p. 3). Rubin underlines this point by arguing that in contrast to other genres, like “the western or science fiction, the range of stories that have been called thrillers is simply too broad”, adding: “the concept of 'thriller' falls somewhere between a genre proper and a descriptive quality that is attached to other, more clearly defined genres – such as spy thriller, detective thriller, horror thriller”. Hence, Rubin suggests that the thriller can be conceived as a “meta-genre” rather than a genre, since it “gathers several other genres under its umbrella”, therefore representing “a band in the spectrum that colours each of those particular genres” (pp. 3-4). Steve Neale (2007), David Bordwell and Kristin Thompson (2008) and Yvonne Tasker (1998), amongst others, have put forward similar views.

The definition of the thriller as a “meta-genre” should not surprise. In chapter one, for example, we saw that similar debates concern the period film. More generally, Raphaëlle Moine (2008) remarks: “generic categories are not the same for everyone, everywhere, in all periods” (p. 11), concluding, “a genre cannot be considered a closed, static, definitive collection; rather, it constitutes a point of equilibrium, a metastable state of a generic process” (p. 206). Rubin’s (1999) final pronouncement on the thriller, indeed, is: “there is possibly no such thing as a pure, freestanding 'thriller thriller’” but “several genres to which the concept of thriller can be applied”, in order to eventually determine “the overarching, 'thrilleresque' common denominators that link them” (p. 4).

My analysis of thrillers featuring nurses echoes Rubin's approach, as I

consider different types of films – 1930s detective thrillers, 1940s/early 1950s film noir, and horror thrillers – which are all distinguished by a common “thrilleresque” identity. My main goal is to ask why nurses have become recurrent subjects of the genre and, consequently, have embodied values that, sometimes, differ from those traditionally characterising the nursing profession, like caring for others. To this end, I shall consider the salient features of diverse “thrilleresque” film types, paying particular attention to the issue of women’s representation and to the historical context generating such productions. My purpose is seeing whether, and to what degree, the above factors have been influential in determining the types of nurses my case studies display.

3.1 Nurses in 1930s Detective Thrillers.

In “The Nurse-Detective in American Movies” (1982c), the Kalischs stress that in 1930s American films nurses recurrently played the private investigator. Literature had an influential role in this. From the late 1920s, two of the most famous American mystery writers, Mary Roberts Rinehart and Mignon Eberhart, published several novels featuring nurse-detectives as protagonists: “Miss Pinkerton” in Rinehart’s case, and “Nurse Sarah Keate” in Eberhart’s. These books were promptly adapted for film: in 1932 and 1941, Lloyd Bacon and Noel M. Smith respectively directed *Miss Pinkerton* and *The Nurse’s Secret*, both based on Rinehart’s novel *Miss Pinkerton* (1932); whereas from 1935 to 1938, Ray Enright, Frank Mc Donald, James Tinling, Bobby Connolly and Noel M. Smith, respectively, directed *While the Patient Slept* (1935), *Murder by an Aristocrat* (1936) and *The Murder of Dr Harrigan* (1936), *The Great Hospital Mystery*

(1937), *The Patient in Room 18* (1938) and *Mystery House* (1938), all films featuring Eberhart's Nurse Sarah Keate.

The character of the nurse-detective also happened to fit the role of the private duty investigator, by enhancing most features of the traditional private-eye. The Kalischs' (1982c) insight, which my comparative and textual analysis will develop and substantiate, confirms this:

Private duty nurses could observe all the members of a suspicious household; they could stay amongst the family day and night, as a policeman could not reasonably do. Nurses had access to drugs, hypodermic syringes, scalpels and other such paraphernalia that could be used for murder, as well as make the nurse, herself, look suspect (p. 147).

It is however true that the nurse as conventionally cast is assumed to be above reproach. Thus, when she happens to subvert this idea, by perpetrating a crime or becoming a suspect – as is the case in film noir, especially – this merely serves to enhance the transgressive and “thrilleresque” qualities of her character. Another noteworthy point concerns the figure of the private nurse, which recurs in thrillers. Clearly, this type of nurse does not work in a hospital (unlike in most nurse films), but in a private house and, usually, her employer is a wealthy man. Especially when the latter also happens to be her lover, patriarchal and class hierarchies feature as important elements in the film and, accordingly, confer on

the nurse a double-edged subservient role – as a number of films in my corpus show.

The aspects the Kalischs (1982c: 147) foreground within adaptations of Rinehart's and Eberhart's novels characterise other American mystery films featuring nurses. Based on Dora Macy's 1930 book, one of the earliest and, perhaps, best known film of this type is William Wellman's *Night Nurse* (US, 1931), with Barbara Stanwyck playing nurse Lora Hart, Joan Blondell as nurse Maloney, Clark Gable as gangster chauffeur Nick and Ben Lyon as bootlegger Mortie. Another example is Arthur Lubin's melodramatic thriller *Secrets of a Nurse* (US, 1938), with Helen Mack as nurse Katherine MacDonald, facilitating the solution of a case involving boxing champion "Killer" Lee Burke (Dick Foran) and criminal lawyer John Dodge (Edmund Lowe).

Besides being part of *Night Nurse*'s and *Cry Havoc*'s cast (US, 1943) – the latter mentioned in chapter two – Blondell in 1932 also played nurse Adams in *Miss Pinkerton*. Lee Patrick performed the same character in 1941 in *The Nurse's Secret*. In 1935, Aline MacMahon was nurse Sarah Keate in *While The Patient Slept*. Marguerite Churchill played the same role in 1936 *Murder by an Aristocrat*, and so did Kay Linaker in *The Murder of Dr Harrigan* (US, 1936), as well as Ann Sheridan in *The Patient in Room 18* (US, 1938) and *Mystery House* (US, 1938).

With reference to Nurse Sarah Keate, it is noteworthy that only one of her screen representations faithfully reflected Eberhart's (1998) original character – a corpulent, middle-aged and authoritarian woman, defining herself as "a spinster of uncertain age, unromantic tendencies, sharp eyesight and an excellent stomach" (p. 12): Jane Darwell in *The Great Hospital Mystery* (1937). The rest of the

“nurses Keate” – played by young and good-looking actresses – only kept the know-how of their literary model. Choosing appealing Hollywood actresses as nurse-detectives makes sense in terms of the films’ popularity. For example in 1931 *The Hollywood Spectator* (12, 2: 23) commented on *Night Nurse* and its director Wellman: “his phenomenal success with *Public Enemy*” – which, like *Night Nurse*, starred the attractive Blondell – “may have led him to believe that the more girls he socks on the jaw the better his picture”. Similarly, in 1935 *The Monthly Film Bulletin* (2, 16: 58) remarked on *While the Patient Slept*: “Aline MacMahon as the nurse [...] is excellent, and the film apart from her is not over-interesting”. In 1938, again *The Monthly Film Bulletin* (5, 51: 76) stressed that the “particularly charming nurse played by Ann Sheridan” was among *Patient in Room 18*’s main strengths.

Leaving aside casting issues, what I consider crucial in these nurse-detectives’ profile is their skill, courage and insight as characters, which their capacity to solve mystery cases either independently or by helping the police reflects. Philippa Gates (2011) stresses: “the prolific female detective[s] of 1930s Hollywood film” were “strong, intelligent, exciting”, and “managed to balance [...] their professional ('masculine') and personal ('feminine') lives”. Remarkably for the time, they “put career ahead of the traditionally female pursuits of marriage and a family” but were “not punished for” that, as “in subsequent decades”. Rather, by the end of the film, they were “rewarded” as professionals and as women, through the acknowledgment of their skills and, often, with a marriage proposal in the final scene. For Gates, despite the fact that most plots offer such a conventional denouement as a marriage proposal, the 1930s female

investigator still appears as a “revolutionary” screen woman – “then and now”, Gates remarks, adding: “indeed, the female detective was more concerned with proving her abilities as an intelligent and competent detective and ‘getting her man’ – in terms of catching the criminal – rather than [...] in terms of matrimony” (pp. 5-6). Gates’ characterisation distinguishes the nurse-detective, too, as the films portraying the character in my corpus attest.

In view of the above, the nurse-detective also offers an interesting case study in terms of the representation of gendered professions. As we have seen on several occasions before, nursing is identified as a female job by default in popular culture. The same cannot be said of the detective, identified as male in popular imagery. The ambivalent, female/male connotation of the nurse-detective thereby raises a number of gender-related questions, with the concept of hybridity here playing a central role. Gates’s (2011) and Linda Mizejewski’s (2004) studies of the woman detective, but also Cynthia Lucia’s (2005) work on the female lawyer support my analysis, as will be elaborated below.

This section’s focus is the investigator in *Night Nurse*. I have selected this film for a number of reasons. It is a typical example of the 1930s detective thriller, and its protagonist is emblematic of the nurse-detective as displayed in most American films of the same genre and decade. Despite this, and unlike, for instance, the “Nurse Sarah Keate” series, *Night Nurse* has rarely drawn significant scholarly attention, which is another reason for my choice. Not least, starring important stars – Stanwyck, Blondell, Gable and Lyon – and Wellman as the director, *Night Nurse* is also an important film within Hollywood cinema and stardom.

The “nurse-detective”: Barbara Stanwyck in Night Nurse (US, 1931)

On 26th August 1931, *The Bioscope's* (88, 1299: 33) review of *Night Nurse* stressed that this was “in many ways a remarkable film”, not least because “never for an instant is there any slackening of interest”. This interest can be located in the plot, whose overall “thrilleresque” nature is complemented and made more intriguing by melodramatic elements and romantic allusions, but also by moments of screwball comedy allied, at times, to comments on contemporary social issues. Together, these elements highlight *Night Nurse's* generic hybridity.

The film's opening recalls the recruitment melodramas I discussed in chapter two. It features Lora Hart (Stanwyck) meeting the matron, and immediately facing an obstacle, the lack of a diploma, which prompts her initial rejection from the nursing school. The film also touches on training, and features a graduation ceremony with references to Nightingale – both elements that, we saw, are typical of the recruitment melodrama.

However, Lora's way to deal with her lack of qualifications indicates that she is not a classic recruitment melodrama heroine, a career woman who fights to pursue her objective by adhering to ethical principles, as the Production Code was to advocate a few years later. As a pre-Code heroine, Lora eventually attains her goal in part by using cunning, leading the hospital's chief, Doctor Bell (Charles Winninger), to vouch for her with the matron, who eventually accepts her as a new probationer.

In terms of women's representation, the 1934 Code's ethics were especially apparent in the films' changed conception of sexuality: “films in which sex took

cover under the veils of metaphor” replaced “films with satin and Freudian slips and explicit sexuality”. Before the Code’s introduction “women were conceived of as having sexual desire without being freaks, villains”, they were “sensualists without guilt” (Haskell 1987: 91). This unequivocally identifies Lora as a pre-Code heroine: the frequent and “almost improper” scenes in which she appears semi-undressed (Charity 2008: 89) attest to this. An example is Lora’s first meeting with Maloney (Blondell), her fellow student nurse: despite the presence of a young male physician, Lora – who has just taken off her shirt – freely reveals her underwear.

Night Nurse also displays Lora's professional qualities depicting her maternal approach to caring for newborn babies when she starts her training. A whole sequence focuses on this: it opens with Lora measuring and bathing a baby, a moment that turns her into a guardian angel (figure 3.1). Lora is central in the frame: standing, she bends over and embraces one of the ward’s newborns (in the lower foreground) whose mother lies in bed, in the background. Here, Lora clearly figures as a mother substitute – a role that defines her character throughout the film. The sequence ends with a close-up of Lora in her white nursing uniform (figure 3.2), one of the recurrent types of framing in terms of showing nurses as angels, as discussed in Part One. Thus, the image is overall bright, with Lora displaying a gratified expression. Stanwyck’s performance of the nurse’s emotions while displaying her professional skills thus is designed to convey reassurance and maternal care, which *mise-en-scène* elements such as clothing and lighting, further magnify.



Figure 3.1



Figure 3.2

Lora's multi-faceted portrayal, incorporating the tough woman, the vamp and the angel, is further – and significantly – enriched by her investigating skills, emerging as the film reveals its thriller nature. During a night shift in the emergency room, Lora treats a man with a gunshot, bootlegger Mortie (Lyon), who asks her not to report his injury to the police. Although initially reluctant, Lora agrees, and Mortie – who has possibly fallen in love with her – not only vows eternal friendship, and but also sends Lora a bottle of whiskey and a huge bouquet of flowers as graduation presents. Following graduation, Lora and Maloney take on a private nursing job, assisting malnourished Nanny and Desney, the daughters of a rich alcoholic woman, Mrs Ritchey (Charlotte Merriam). Lora works the night shift, and soon begins to suspect her young patients may be victims of intentional starvation. Accordingly, she decides to talk to the family's physician, famous Doctor Ranger (Ralf Harolde), who firmly denies her suspicions, also stressing that the therapy he prescribed is apposite. However, Lora does not give in, and discusses the issue with Doctor Bell: he suggests she should take advantage of her long working hours in the house and, if that is the

case, fight from the inside. Back on duty, Lora meets Mortie delivering alcohol to Mrs Ritchey's house, for a party Mrs Ritchey's boyfriend Nick (Gable) organises. Pretending to be the chauffeur, Nick is in fact a gangster who constantly supplies his girlfriend with alcohol in order to gain control over her fortune. Concerned about Nanny's illness, Lora asks Mortie to go find some milk for a bath, a potential remedy for the child's recovery. Meanwhile, the housekeeper has confirmed Lora's suspicions: Nick and Doctor Ranger are plotting against Mrs Ritchey's children, to take charge of their trust fund. Lora confronts Nick, who tries to kill Nanny by throwing the milk out. With Lora's help, Doctor Bell saves the child at the last minute. Mortie gives Lora a lift to the police station. The story ends with the suggestion of romance between the two and of Mortie's "redemption" from his criminal past thanks to "good" Lora.

As the plot highlights, *Night Nurse* is a detective thriller featuring a canonical nurse-investigator: Lora works the night shift in a house surrounded by mystery; her long hours at work in this environment enable her to rapidly identify the problem, and start investigating; despite the initial lack of evidence and of external support, her suspicions turn out to be correct and she eventually prevails, thanks to her insight and courage. However, *Night Nurse* is also the story of a young woman who finds her real vocation in nursing, embracing the profession's distinctive values of care and self-sacrifice. The very title of the film, *Night Nurse*, conveys a sense of reassurance, skill, and surveillance of patients as well as mystery, danger, and sexuality, which mirror Lora's hybrid identity as skilled nurse, clever nurse-detective and sexually attractive woman, with the film's ending suggesting romance. Thus, *Night Nurse* resembles other films featuring

nurse-detectives analysed by Gates (2011: 5-6); love is a relatively peripheral element and as such does not undermine Lora's professional side – as is usually the case, as discussed in Part One.

Critics have not always acknowledged positively *Night Nurse's* originality as a thriller. The reviews following its release are indicative. For example, *The Bioscope* (1931 88, 1299: 33) praised the film's "high standard of acting", despite the fact that "the story depends on incidents in the life of a nurse". A different view was *The Hollywood Spectator's* (1931 12, 2: 23), commenting: "as a picture of two modern young women learning in a great hospital how to become nurses, this has its points", but "as a supposedly accurate and intelligent glimpse at the modern scene, it is less than nothing at all".

My first interest in this section is positioning Stanwyck's Lora, one of the first nurse-detectives on screen, upon the spectrum of nurses' images so far examined, through an analysis of her portrayal as an "amateur investigator" – a figure Gates (2011) identifies within the representational framework of screen female detectives. What differentiates a female "amateur investigator" from a "professional" one, Gates says, is that the first considers investigating simply as a "hobby", not as a prospective career (p. 77). This categorisation aptly fits Lora and the other nurse-detectives I previously mentioned: either spontaneously or in reply to the acknowledgment of their detecting skills', these characters always underline that nursing is their real vocation in life. In Lora's case this is especially evident, since caring for Nanny and Desney is what motivates her investigation.

However, other features besides maternal caring define Lora as an amateur detective. A pivotal one is her strength, displayed throughout the investigations

and balancing the femininity of both her angelic and “pre-Code” sensual natures. Although these combined facets may be said to define most early 1930s heroines – “women [...] entitled to [...] embody certain 'male' characteristics without being stigmatised as 'unfeminine'” – they were also to become Stanwyck’s distinctive traits as a star, epitomising “the tough female” (Lipman 1994: 384).

Lora’s tough femininity emerges several times during the film. A relevant example concerns her visit to Doctor Ranger, where she expresses her views on the cause of Nanny and Desney's malnutrition. The discussion’s heated tones convey its challenging nature, with the protagonists' poses and expressions distinctly communicating tension.



Figure 3.3



Figure 3.4

Lora stands with her hands rigidly fixed on Ranger’s desk, and her expression is tense: her mouth is wide open and her face craned towards Ranger, whom she addresses (figure 3.3). Ranger's overall restraint contrasts and further enhances Lora's vivacity: he looks at her in silence, his facial traits being much more relaxed than hers. The characters' position is also significant: Lora stands in the background, opposite the camera and above Ranger who, in profile, sits down

in the foreground. It is noteworthy that Lora wears civilian clothes. In uniform, the power relations to a doctor would have rendered her firm behaviour less admissible from a hierarchical angle. However, Lora's tough nature is also in evidence in the scenes where she interacts with physicians in her uniform.

Overall, *Night Nurse's* nurses – and Lora, especially – appear tougher than men who, in different ways, are rather deficient. This is particularly (and, unusually) apparent in the nurse/doctor pairing. For example, *Night Nurse* frequently juxtaposes nurses' know-how and effectiveness with young doctors' laziness. The latter, besides, are often ridiculed in the ward for their hapless approaches to nurses who, routinely, turn the physicians' advances down. Notwithstanding their seniority, doctors are all criticised as womanisers: following a young physician's attempt at courting, nurse Maloney comments that, in terms of relationships, senior doctors are not better than interns, as neither of them ever “marry nurses”.

As tough females, against the weaker, ridiculed and stigmatised male (medical) characters, *Night Nurse's* nurses clearly distinguish themselves from their melodramatic counterparts: unlike the latter, they do not fall in love with doctors, and are also not intimidated by the latter's higher position. Tough, confident and disillusioned, these nurses are typical heroines of pre-Hays Code Hollywood: while still operating within a patriarchal gender view, they are given more autonomy than most nurses my thesis examines.

A number of elements distinguish these “tough” nurse-detectives from other kinds of “tough” nurses in classical cinema, such as those in biopics. One is sexuality. In Lora, unlike in Nightingale and Cavell, sensuality is a core point and

a distinctive feature. Besides being a typical trait of Pre-Code heroines, sexuality is frequently associated also with screen working women: “in the movie workplace, women are usually regarded as sex-objects”, Galerstein (1989: xvii) asserts. This parallel affects the female investigator, too. Yvonne Tasker (1998) argues that “questions of desire and sexuality” mark “those narratives which enact a process of investigation defined by a lack of distance between hunter and hunted” (p. 105) – a notion that, interestingly, also features in Cynthia Lucia’s 2005 study of the female lawyer film, which uses “the role of female lawyer as a kind of shorthand, bringing explicitly to the surface all those issues involving female sexuality”. Sexuality is a core theme also in Linda Mizejweski’s 2005 study of the woman-detective in novels, television and film.

Interestingly, though, Lora uses her sex appeal mainly for the benefit of the children’s recovery. The key point lies in her awareness of her sex appeal as a powerful tool, of which she does not hesitate to take advantage, albeit for a laudable end. By contrast, in the biopics, Nightingale and Cavell disavow their sexuality as part of projecting an image of maternal care, on the one hand, or detachment and distance, on the other.

Lora’s toughness also marks her approach to gangster Nick. Indeed, when her suspicions about the cause of the children’s disease are confirmed, nothing can stop her confronting him, despite the danger she may face. As Lora and Nick argue, they look at each other angrily, their profiles to camera (figure 3.4). A medium-shot frames them, giving prominence to their antagonistic gazes. Their clothes’ colours – Lora in a white uniform, Nick in a black, high-necked jacket – further enhance the characters’ contrasting features. The colours white and black

traditionally evoke the ideas of good and evil, respectively, which further connote Lora's and Nick's different natures and respective goals. Lora's pose also suggests her pluck: as someone in command of the scene, she proudly stands close to Nick, with her hands on her hips, and her head defiantly raised to look him straight in the eye.

The same posture characterises Lora in another scene, featuring her attempt to inform Mrs Ritchey about Nanny's worsened condition. Mrs Ritchey gives a party and, unsurprisingly, Lora finds her drunk at the bar with a man, similarly drunk. Notwithstanding Mrs Ritchey's supposed authority as both Lora's employer and the children's mother, Lora's understanding promptly turns into harsh and eventually uncontrolled behaviour. She stands opposite the two alcoholics, looking down on them (figure 3.5): her authoritative pose and severe gaze, contrasting with the drunkards' disorientated expressions, convey a sense of command and superiority. Disgusted by the pair's unforgivable conduct, Lora lets her impulses prevail: she eventually yanks Mrs Ritchey and slaps the man; then, she leaves. Notably, the scene is set at Mrs Ritchey's home, not at the hospital. Lora's reprimand and authoritative reaction – arguably contrasting with (screen) nurses' usually more emollient and empathetic behaviour – may thereby be interpreted as due to her being “displaced”, including in terms of social status/standing. As she works as a private nurse, however, Mrs Ritchey's house is Lora's workplace; moreover, she wears her white nursing uniform, a strong visual clue that confirms both her professional authority and moral integrity – especially by contrast to her alcoholic counterparts in the scene.



Figure 3.5



Figure 3.6

Although Lora's tough behaviour is here taken to the extreme, this scene is not as comic as it may initially appear. Through Mrs Ritchey, *Night Nurse* calls attention to the issue of alcoholism, a core social stigma of America during that period. In 1919, the 18th Amendment to the US Constitution aimed to counter this problem by banning alcohol's sale and production, initiating the so-called Prohibition. The alcohol ban was repealed in 1933 with the 21st Amendment. Contributory factors to this were, amongst others, the Anti-Prohibition movement's progressive strengthening during the 1920s, and the beginning of the Great Depression in 1929, as manufacture and sale of alcohol offered more job opportunities and, through taxation, favoured economic recovery.

Although alcohol consumption was not a new theme in Hollywood cinema – films like *The Drunkard's Fate* (US, 1909) and *The Weaker Mind* (US, 1913) date back to the silent era – the way *Night Nurse* approached the topic was more critical than most 1920s and early 1930s films on the same subject. As Peter C. Rollins (2003) stresses, with the exception of films like *City Lights* (US, 1931) and *The Struggle* (US, 1931) – which, like *Night Nurse*, emphasise alcoholism's devastating consequences on social and family values – alcohol addiction was

mainly portrayed “not as a questionable pastime”, but as an “intimate everyday activity for sophisticated Americans” (p. 519).

By contrast, *Night Nurse* does stigmatise Mrs Ritchey, identifying alcohol as the main cause of her failure as a mother. Besides the numerous scenes ridiculing Mrs Ritchey and her friends’ foolish behaviour, towards the end of the sequence considered above Lora expresses a clear judgement on Mrs Ritchey’s ineptitude through a rhetoric of disappointment: “You... Mother?”. The scene ends with Mrs Ritchey lying on the floor in a state of unconsciousness. Evidently, Lora embodies the motherhood ideal through her identity as a nurse. The depiction of her care for patients who, except Mortie, happen to all be very young, recalls the image of a mother lovingly caring for her children.

This latter point further highlights Lora’s complexity in gender terms. As we saw, she is tough and “masculine” mainly in relation to delinquent or defective men – i.e. Nick and Doctor Ranger – and the “bad” mother, whom she replaces as a “good” mother figure. This suggests that Lora’s toughness is acceptable, within the terms of the film, only as a part of her motherly characterisation. Thus, Lora epitomises strong femininity but still within conventional patriarchal terms, and as a balance to the film’s arguably misogynist approach to Mrs Ritchey, whose children Lora protects thanks to her professional skills but also her motherly strength.

Completing Lora’s profile as an amateur sleuth is her know-how, which her investigative methods illustrate. Lora’s attempt to contact Doctor Bell for assistance after Nanny’s deterioration is an example. Walking quickly down a corridor, Lora reaches a telephone. Apparently, there is nobody around (although

the eventual cut to Nick shows that he is hidden in a room nearby, and can overhear the conversation). A long shot displays Lora leaning against the wall hand on hip, her eyes downcast, while asking to talk to Bell. Both her pose and tones suggest a professional attitude. Subsequently the camera cuts to a medium shot, giving particular prominence to Lora's face, which her white uniform and head cover enhance. Though partly downcast, her eyes communicate her changing feelings. She initially appears hopeful, a timid smile illuminating her face. Yet, upon hearing that Bell is not available, her expression changes: sighing, she slightly raises her head, disclosing her disappointment (figure 3.6). However, her spirit quickly reawakens her confidence: a shrill voice marks the end of her telephone call, resolution being shown as she smiles again (figure 3.7).

Emotional involvement and determination are therefore among the core elements sustaining Lora's investigative activity, although intuition plays a pivotal role, too. She has a hunch, conveyed mainly through gesture and expression, as the scene portraying her meeting with Mortie at Mrs Ritchey's (figure 3.8) shows. Mortie arrives unexpectedly, and seeing him stirs Lora's pragmatism: a *plan américain* frames the two looking at each other, their profiles to the camera. This framing enhances their contrasting attitudes: Lora stands firm, pointing at Mortie with an evidently satisfied expression; by contrast, he looks confused, as his posture also suggests through his shoulder being slightly curved forward, a sign of perplexity. Predictably, Lora's will prevails in this situation, too.



Figure 3.7



Figure 3.8

Lora's essentialist lies in the unusual but harmonious combination of her feminine and masculine sides, crucially marked by her exceptional intuition. Lora is a nurse, therefore a working woman who is overall depicted as equal to her nursing role – unlike the mainstream screen working woman, whose professional skill often appears undermined by romance/family priorities, as in the recruitment melodramas examined in chapter two. A similar configuration is found in other screen professional women marked as predominantly female, such as secretaries, about whom Galerstein (1989) stresses: “by the end of the film the secretary has been ‘successful’ and is about to marry the boss, or someone else, and quit work” (p. 331).

Lora's colleague Maloney is closer to the traditional working woman's profile: she decides to undertake nursing because “this is the only job I know where they pay you to learn”, a statement that here is clearly marked as materialistic and denoting lack of affect. Lora's dedication to her patients, an attitude through which she embodies “feminine” angelic virtues and motherhood ideals, corroborates instead her genuine calling. However, Lora's femininity is also reflected in her sexy behaviour, about which critic Dan Callahan (2012)

argues:

Lora knows that men are such dopes that she doesn't need to put any real effort into attracting them. Sex is an essential tool for the lowborn working girl of 1931 if she expects to get anywhere, and Stanwyck seems very Zen and stoically dignified about that reality (p. 37).

Counterbalancing Lora's accumulation of feminine traits are both her toughness and her characterisation as a detective. Taking on the detective's role is what determines Lora's masculinisation on a symbolic level. Although she is an "amateur" detective – thus, undertaking investigations as a hobby – Lora appears equal also to this role, as she is to nursing. By undertaking a commonly male role, while being a woman, Lora symbolically embodies a hybrid, androgynous figure. Though this characterisation ultimately fits patriarchal ideology – her "toughness" is acceptable because it is aimed at protecting children from a "bad" mother, a configuration betraying a misogynist approach to women – it is also true that *Night Nurse* depicts most of the male characters as "horrors [...] either treacherous villains or patsies" (Callahan 2012: 37), and ultimately gives a poor vision of masculinity. By contrast, Lora's caring, but also tough and competent identity projects an affirmative image of professional femininity. As we will see, hybridity also recurs in the film noir nurses, examined in the next section.

Night Nurse is relevant also in the context of interdisciplinary scholarly research. Arguably a "wonder-nurse", Lora is the fictional expression of 1930s

America's popular mentality that, as I discussed in chapter two, was extremely sympathetic to the nursing profession. The Kalischs (1987: 76-81) stress that, during the Great Depression, nurses were held in high esteem by Americans: these women responded to the crisis's hardship, and were seen as real professionals, their practice requiring solid training. Cinema, the most powerful and popular medium of the period, could convey this view: Lora's strength and gender hybridity are a revealing example of this more general positive trend and attitude.

3.2 Nurses in 1940s and 1950s Film Noir

The end of the 1930s led to the progressive decline of the nurse-detective figure in film. Although this character featured in some later productions – i.e. Vincent Sherman's *Backfire* (US, 1950) – from the 1940s up to the early 1950s nurses tended, instead, to appear in film noir. My corpus includes around 10 noir productions, mainly released over the period mentioned above. Amongst them, only two are British: Carol Reed's *The Girl in the News* (UK, 1940), and Basil Dearden's *Woman of Straw* (UK, 1964). The rest are American – unsurprisingly, given the genre's pre-eminence in Hollywood, as E. Ann Kaplan (1998) and Andrew Spicer (2002), amongst others, have observed. Examples of American film noir depicting nurses include Reginald Le Borg's *Calling Doctor Death* (US, 1943), Budd Boetticher's *Escape in the Fog* (US, 1945), Alfred L. Werker's *Shock* (US, 1946), Curtis Bernhart's *Possessed* (US, 1947), Norman Foster's *Kiss the Blood off My Hands* (US, 1948), Vincent Sherman's *Backfire* (US, 1950), George Sherman's *The Sleeping City* (US, 1950), Irving Rapper's *Bad for Each Other* (US, 1953), and Alfred Hitchcock's *Rear Window* (US, 1954).

With the exception of *Possessed*, which the Kalischs (1987: 136) briefly analyse, these films have not been considered in any account of the representation of nurse I have encountered. Indeed, most studies of nurses' depictions in 1940s and 1950s cinema focus on war films, melodrama, and comedy (see: Kalish & Kalisch 1987, Hallam 2000).

Although there is scholarly debate about whether film noir is a genre, some common features emerge. Lesley Stern (1994) pinpoints darkness as a distinctive element, both on a visual and a symbolic level, as the term “noir” (meaning black in French, since the expression “film noir” was coined by French critics) suggests. Thus, night-time settings are characteristic, enhancing the ideas of danger and crime that distinguish noir plots. Characters exude a sense of mystery, suspicion and malaise spurring their actions. A non-linear narrative – involving the use of flashbacks – jointly with the unconscious’s depiction, and disorienting framing usually emphasise the characters’ feelings. “Explosive sexuality” is also a crucial feature, which highlights women’s importance within the genre (pp. 159-60). All these elements also characterise noir films featuring nurses.

Although film noir’s most famous female type is the *femme fatale*, a “quintessentially ambiguous” woman “specializing in murder, seduction and revenge” (Stern 1994: 159-60), and therefore usually identified as a “bad” individual, not all women in the genre comply with this categorisation. Janey Place (1998) identifies two opposing womanly archetypes in film noir: “the dark woman”, who is “comfortable in the world of cheap dives, shadowy doorways and mysterious settings”, and the “redeemer”, the “agent of integration for the hero into his environment and into himself” (p. 53). The films I examine in this section

span both types of female characters, in their diverse nuances or, as Place puts it, in “the particular mix and versions of the more general archetypes” (p. 48). The “bad woman’s” image distinguishes, for example, films such as *Calling Doctor Death* (1943) and *Shock* (1946), where nurses are agents or supporters of crimes, eventually punished for their misbehaviour. The “good woman” is, instead, displayed in *The Girl in the News* (1940), *Kiss the Blood off My Hands* (1948), *Backfire* (1950), *Rear Window* (1954) and *Woman of the Straw* (1964).

Unlike the *femme fatale*, one of the most popular and analysed female icons (Spicer 2002: 90), the “good woman” of film noir needs further consideration. Beyond the “redeeming” or “nurturing woman” archetype – a feminine type who “gives love, understanding [...] asks very little in return, and is generally visually passive or static”, therefore representing “an alternative to the nightmare landscape” of the genre, of which “she herself must not be a part” (Place 1998: 60) – this figure is much more complex. “Noir nurses” offer evidence of this, as the nurturing woman’s archetype does not actually define them.

Contrasting Place's definition, the noir “good nurses” are resolute individuals, who happen to be involved in the criminal underworld, though their aim is fighting it. This enables them to reveal their inherent goodness. In some cases, their role as enemies of crime is motivated by the desire to redeem their beloved villain. Ambiguity – a distinctive feature of film noir in general, and of good nurses in them – thereby is a key concept in my analysis. More often than not, the noir “good” nurses’ connections with the criminal sphere produce conceptual continuum with their *fatale* counterparts, as I shall discuss in this section's conclusion.

Thus, my account of the nurse's representation in film noir concentrates on two types: the "nurse *fatale*" and the "good nurse". The first is examined in Reginald Le Borg's *Calling Doctor Death* (1943), the second in Norman Foster's *Kiss the Blood off My Hands* (1948). Both films are emblematic film noirs, and their nurses typify the kind of "badness" and "goodness" defining the profession within the genre. Furthermore, despite their importance in the history of Hollywood cinema and stardom – *Calling Doctor Death* is part of the famous cult series "Inner Sanctum" by Universal, and *Kiss the Blood off My Hands* features Joan Fontaine and Burt Lancaster as protagonists – these films have received little critical attention. My analysis also aims at contributing to research on the history of nursing, with regard to the issue of the screen image of the profession.

3.2.1 The "Nurse Fatale": Patricia Morison in *Calling Doctor Death* (US, 1943)

Anthony Tate and George Tuner (1986) define *Calling Doctor Death* as "the first and best of the 'Inner Sanctum' features" (p. 35). In 1943, the film inaugurated a series of six low-budget Universal productions, also including *Weird Woman* (1944), *Dead Man's Eyes* (1944), *The Frozen Ghost* (1945), *Strange Confession* (1945) and *The Pillow of Death* (1945). Lon Chaney played the protagonist in the whole series, whose title, "Inner Sanctum", previously designated both Simon & Schuster Publishers' mystery novel subsidiary, and a popular radio programme: Universal had to buy the rights to use the same title for the films.

Defined as "psychological dramas", these productions were deemed to start

“a new trend”, being among the first to mix film noir’s and the traditional horror picture’s traits with the depiction of the unconscious. The latter was crucial to the series’ acclaim: supported by Chaney’s stream of consciousness narration as a voice-over – a feature that, following *Calling Doctor Death*’s success, ended up characterising the whole series – the unconscious’s representation was also key in determining the Inner Sanctum films’ “high standard of cinematography” (Tate & Turner 1986: 34-5). This is particularly true of *Calling Doctor Death*, which was applauded for its “enterprising direction”, offering “excellent portrayals out-of-rut” (*Today’s Cinema* 62, 5017: 24), and for the use of “different visual effects [...], which were absolutely fresh at that time” (Weaver, Brunas & Brunas 2007: 382).

Directed by “good eye” Reginald Le Borg, renowned for his mastery in terms of composition and dramatic lighting (Tate & Turner 1986: 35), *Calling Doctor Death* is the story of Doctor Mark Steele (Lon Chaney), a brilliant neurologist who uses hypnosis as an effective treatment for his patients, assisted by capable Stella Madden (Patricia Morison), an angelically beautiful nurse. Mark holds Stella in (unusually) high esteem, as his interior monologue signals at the beginning of the film: “Stella is a fine person. She is not only a nurse. She is my co-worker and confidante. I depend on her more and more”. Though in love with Mark – true to most representations of working women (for whom love and career often overlap), and of nurses (doctors being frequently their object of desire) – Stella cannot openly express her feelings, since he is married. However, Mark’s marriage is a failure, and the reason for his developing crisis as a man and a professional: he can read everybody’s mind but that of his wife Maria (Ramsay

Ames). The latter has an affair with architect Robert Duval (David Bruce): though in love with Maria, Mark can no longer tolerate her behaviour.

Unlike the saintly Stella, Maria is a typical *femme fatale*: highly attractive and unscrupulous, her nature is well-described in one of Mark's streams of consciousness, which Maria's portrait inspires: "one thing [...] Maria [...] was able (*sic.*) to hide from me: those eyes, mean eyes, selfish. They really portray her soul". As Maria's case confirms, the *femmes fatales*' identification in film noir is usually straightforward, not least because these women's "appearance is always explicitly sexual" (Spicer 2010: 329). However, as my analysis shall highlight, this does not apply to Stella, who turns out to be highly ambiguous: her seeming angelic image hides a lethal streak. Although this is not true of all lethal nurses, Stella's professional identity plays a crucial role in her peculiar embodiment of the *femme fatale*: her dangerous behaviour contradicts the nurse's traditional angelic image.

Mark eventually asks Maria for a divorce, but she refuses. This episode increases his interest in Stella – which, technically, would make the couple comply with the canonical, patriarchally inflected nurse/doctor narrative. Mark's closeness to Stella culminates in Inspector Gregg (J. Carrol Naish) informing them that Maria has been murdered. Mark and Duval, the last people to have seen Maria, are both suspected of the crime and, although Duval is eventually arrested, Inspector Gregg believes Mark is the real culprit. Mark is frightened, also because partly unaware of his own conduct on the night of the killing, having suffered from a mental blackout. Thus, he asks Stella to hypnotise him and record his speech. While proving his own innocence, Mark's unconscious account accuses

Duval, who is judged guilty and sentenced to death. When Mark tells Stella, she unexpectedly faints. A series of events causes Mark to suspect Stella. Thus, on the night of Duval's sentence to death, Mark invites Stella out, and then hypnotises her in his office. Stella's unconscious confession, which Inspector Gregg also hears, leads to her arrest, therefore saving innocent Duval and freeing Mark from blame.

As *Calling Doctor Death*'s synopsis suggests, nurse Stella's character fits squarely into the *femme fatale*'s template, "the woman who 'never really is what she seems to be'" (Spicer 2002: 90). Stella's mischievous behaviour reflects her devilish ambiguity, which a number of other elements emphasise. I shall show how Le Borg's *mise-en-scène*, especially framing and lighting, plays an important role, enhancing Morison's performance of Stella and giving prominence to her "elegant villainy" and "alluring, vaguely exotic personality" (Weaver et al. 2007: 546). The latter trait, associated with sensuality, emerges in the only scene featuring Stella as provocative: lying in bed, with her baby-doll nightdress, and her long dark hair loose for the only time in the film. However, Stella's *fatale* aura does not really rely on displaying her bodily features: subtler aspects of her character convey her appeal.

Morison's star persona also sustains Stella's association with the *femme fatale*. When *Calling Doctor Death* was released, Morison – who later became a Broadway musical star (her performance in 1948 *Kiss Me, Kate* marked her greatest success) – was famous for her *femme fatale* or "lethal lady" roles in B movies (Weaver et al. 2007: 382). This certainly contributed to strengthening this aspect of her character in *Calling Doctor Death*. Later, Morison also played the

beautiful criminal Hilda Courtney in Roy William Neill's *Dressed to Kill* (US, 1946), the 12th and last production of Universal's Sherlock Holmes.

Below I analyse how Nurse Stella embodies the *femme fatale*. This section also opens the discussion on exploitation, a core focus of Part Two.

Unlike other “*fatale nurses*”, for example nurse Elaine Jordan (Lynn Bari) in Alfred Werker's *Shock* (US, 1946), whose role within the story is clear from her first appearance – dangerously beautiful Elaine being the lover, the supporter and, eventually, one of the victims of killer/psychiatrist Doctor Richard Cross (Vincent Price) – in *Calling Doctor Death*, evidence about Stella's real identity is only offered by the end of the film, through her unconscious confession. However, the way she is depicted in some scenes encourages the audience's suspicion: her controlled behaviour and expressions somehow betray her real, deceitful character. As Waver and colleagues (2007) stress: “[Stella's] cool, deliberate emoting [...] gives every indication she isn't as innocent as she pretends to be” (p. 382).

On a visual level, the contrast between Stella's apparent purity and the revelation of her evil nature is crucial to conveying the idea of *fatale*-ness, not least because this complies with the figure's quintessential ambiguity. Stella first appears in the opening sequence, featuring Mark's hypnosis of a young woman. The initial impression Stella gives is that of a professional nurse. A medium shot (figure 3.9) illustrates her diligence in assisting Mark: she stands next to him, in silence, and her attention is totally focused on the patient, who is opposite both her and Mark, to the left of the frame off-screen. The image communicates collaboration between nurse and doctor, which its composition further underlines.

Though Mark is in the foreground, Stella's white uniform makes her stand out from the darkness, giving her prominence. The idea of cooperation is corroborated verbally, too. In the interior monologue previously quoted, Mark stresses his recognition of Stella does not merely depend on her professional skills. Rather, he sees in her a “co-worker”, their relationship being based on mutual confidence, which produces a progressive sense of dependency on his part.



Figure 3.9



Figure 3.10

Stella tries to take advantage of Mark's admiration and trust as a subtle means of seduction, since she has fallen in love with him. This feeling, crucial to the narrative as motivating Stella to kill Maria, is also introduced in the opening sequence. During the hypnosis session, while Mark is intent on his procedure, Stella starts looking at him intensely, which clearly suggests her attraction to him. The camera emphasises Stella's behaviour by switching from a medium shot to a medium close-up (figure 3.10). Composition also plays a role in determining Stella's prominence: Mark's profile (in the foreground) and the lamp above her head circumscribe – and thus, single out – her figure, along with the frame's left and bottom sides. Another relevant element is lighting, emphasising even more

the contrast between Stella's white uniform and the dark surroundings, and illuminating her face, in particular her intense gaze.

The focus on Stella's gaze is recurrent in the film. Besides being key to the scene describing her hypnosis – which I shall detail later – the emphasis on Stella's gaze also marks the depiction of her everyday relationship with Mark: she often stares at him during their one-to-one conversations about his troubles. Stella's seemingly innocent gaze, which the camera foregrounds through different types of close-ups, is not only aimed at encouraging Mark, but is a means to boost her appeal to him, while taking advantage of his psychological frailty.

Exemplary of the above is the scene where Mark, still evidently shocked, and possibly seeking Stella's comfort, tells her about the heated argument he had with his wife who, cynically, refused to divorce him. Through shot-reverse-shot, a medium close-up frames Stella sitting down at her desk (figure 3.11), her head and eyes elevated towards Mark, who stands opposite her, to the right of the frame off-screen. Though Stella's expression may simply suggest dismay about Mark's account, a somehow seductive aura also typifies her, suggesting her *fatale* nature. Beyond her voice's enticing tone, her facial expression reinforces this perception, i.e. her partly open lips and her eyes, which stare seductively at Mark. Significantly, following this image, Mark reveals to Stella his attraction to her.

Beyond Stella's gaze, her ability to dissimulate also sustains her representation as an ambiguous "nurse *fatale*". Dissembling characterises Stella during most of the film, being only contradicted in two cases: when she deals with people who may suspect her culpability – i.e. Duval's wife and Inspector Gregg – as her pleasing manners suddenly switch into either detachment or aggression;

and when she is informed about Duval's sentence.



Figure 3.11



Figure 3.12

Examples of Stella's dissimulation are offered in the scene featuring the announcement of Maria's murder. Stella enters the office where Mark is asleep, having taken some sedatives. A sign of her evil nature, Stella appears untroubled by her recent crime: witnessing Mark's state of confusion, she smiles and even makes fun of him, this feeling suddenly changing when she realises he may not be well. All she cares about, evidently, is Mark and his love: no matter what this involves. Initially, Stella's spirit shows in two close-ups of her smiling (figure 3.12) and concerned face (figure 3.13). When Inspector Gregg announces Maria's death, Stella's dissembling reaches its most dramatic expression. A medium close-up illustrates her supposedly shocked reaction (figure 3.14), which her gesture and facial traits mirror: she suddenly joins her hands and raises them to her breast as an expression of shock and compassion, staring Gregg in the face, her lips open in disbelief.



Figure 3.13



Figure 3.14

Stella's coolness and deceit start wavering – establishing a level of doubt about her guilt – when Mark, in the frame's foreground, shares with her bad news: Duval's appeal has been rejected, and his death sentence is imminent. Stella's reaction is unexpectedly extreme: in the frame's background, she lets the glass she holds fall down to the floor and break, whose piercing noise in the otherwise silent room signals panic, and calls attention to Stella, despite her peripheral position (figure 3.15). Stella's demeanour suggests fear: her body is rigid, her arms and hands stiffly bent, and her expression tense – her eyes and lips wide and partly open. She knows Duval is innocent and, by hearing about his condemnation, she lets her “human side” prevail, overtaken by guilt.

At this point, she falls herself to the table nearby. Mark duly succours her, helping her reach the sofa and lie down. The camera frames them in a medium shot (figure 3.16), highlighting Stella's expression during recovery. She looks dazed. Mark thinks her indisposition is due to excessive hard work; however, her expression and pose also suggest unease: her eyes are downcast, fixing an indefinite point, and communicating sadness; besides, she has put a hand onto her forehead, a position people often assume to express a feeling of malaise, but here,

perhaps, also a way to conceal her face and real feelings.



Figure 3.15



Figure 3.16

Stella's shocked reaction marks her real nature's progressive disclosure. This process culminates, both on a narrative and a visual level, in the unconscious confession of her crime, through hypnosis. The prelude to this key moment is disquieting, preparing the spectators for Stella's revelation. It is late; Mark and Stella are in the office, waiting for Duval's execution. Darkness dominates the scene, whose only lighting comes from two lamps and a drinks cabinet. Stella's outfit, black for the first time since the film's beginning, matches this gloomy atmosphere, though her dress's shiny embroidery – whose brilliance lighting effects enhance – calls attention to her. A general sense of unease strengthens the scene's overall noir-ness, with cinematography sustaining this effect: canted framing (figure 3.17) emphasises the characters' anxiety, especially Stella's. Her pose – i.e. her arms, stiffly bent, and her rigid posture – as well as her rigid facial traits and perturbed look also mirror her tension.



Figure 3.17



Figure 3.18

In this typical noir context, Mark surreptitiously hypnotises Stella. The unravelling of her subconscious confession – featuring her criminal actions’ major events as pictures superimposed on her pale hypnotised face’s still image (figure 3.18) – is a key moment in the film: it marks Stella's formal embodiment of the *femme fatale* both through her identification as a criminal, and through her visual resemblance to the female icon. Contextually, this image also symbolically underlines Stella's dual identity, combining both her “pale/angelic” and “dark/lethal” facets.

The flashback of Stella's tampering with the telephone cables aptly illustrates the above. A medium shot portrays Stella secretly entering her workplace (figure 3.18). The only source of lighting comes from the door behind her, though her hypnotised pale face’s extreme close-up – subjacent the flashback figure – produces a luminous effect. Stella's appearance contributes to enhancing the film’s noir aspect: her black clothing, with a suit and a wide brim hat, coincides with the *femme fatale*'s classic iconography (earlier we have seen her wear glamorous earrings) (Copjec 1993: 229, Browne 1998: 135, Neroni 2005: 22¹). Stella's furtive air, which her pose and expression communicate, magnifies

the scene's mystery: she does not look at the camera, her head turned a little to the right and her eyes downcast, staring at an indefinite point on the ground.



Figure 3.19



Figure 3.20

The thriller-esque atmosphere is also conveyed through the use of shadows, as in the scene depicting Maria's murder, which alternates images of Stella as killer (figure 3.19) with projections of her shape on the wall (figure 3.20). These emphasise Stella's evil nature and, contextually, enhance her iconic value as a *femme fatale*, her gestures and expression imbued with violence.

Stella is eventually arrested. This final punishment marks her official recognition as a *femme fatale*. However, before her detention, the spectators are also offered the visual climax of the disclosure of Stella's real nature. Waking up from hypnosis, she is unable to control her emotions: she bursts into an acute scream, whose power is emphasised through an extreme close-up of her face (figure 3.21). While boosting the scene's tense character up to its highest level, the combination of these extreme visual and sonic effects also signals the case's eventual resolution.



Figure 3.21

Not all the nurses of film noir are *femme fatales*. In fact, most of them tend to comply with the opposite female archetype, the nurturing woman, though in a special way. The next section aims to highlight how film noir nurses embody the “good” female model and, by so doing, provide an interesting case study in terms of women’s representation in film (noir).

3.2.2 The “quasi-nurturing nurse”: Joan Fontaine in *Kiss the Blood off My Hands* (US, 1948)

Following her performances in Alfred Hitchcock's *Rebecca* (US, 1940) and *Suspicion* (US, 1941) – subsequently leading to several award-winning performances¹ – Joan Fontaine played nurse Jane Wharton in Norman Foster's *Kiss the Blood off My Hands* (US, 1948). Burt Lancaster, who launched his Hollywood career in Robert Siodmak's *The Killers* (US, 1946), played Bill Saunders, a Canadian ex-war prisoner suffering from psychological trauma. Robert Newton played the “bad character”, racketeer Harry Carter.

¹ These include an Oscar award for Best Actress in *Suspicion*; then a second Oscar nomination for her part in Edmund Goulding's *The Constant Nymph* (US, 1943). Fontaine also played Jane Eyre in Robert Stevenson's eponymous 1943 film.

The film's cast and "occasional thrills" were identified as *Kiss the Blood off My Hands*' main points of appeal by the *Kinematograph Weekly* which reviewed it shortly after the film's release, adding, however: "in spite of powerful acting and artistic direction, [the film's] leading characters" were "too opposite to lend conviction of the gloomy happenings" (1949, 2181: 18). In a late 1970s interview with Doug McClelland, Fontaine herself dismissed the film: "*Kiss the Blood off My Hands* was made under the aegis of William Dozier, who was then my husband and an executive at Universal. I would never have done this otherwise" (quoted in Tibbetts & Welsh 2010: 42).

Nevertheless, Geoff Mayer and Brian McDonnell (2007) define *Kiss the Blood off My Hands* as a "minor but interesting noir" (p. 250). Beyond its title – a clue to the film's noir identity, evoking a mix of sensual and fateful images like *Kiss of Death* (Henry Hathaway, 1947), *Kiss Me Deadly* (Robert Aldrich, 1955), *A Kiss Before Dying* (Gerd Oswald, 1956) – other elements confirm *Kiss the Blood off My Hands*' significance as a film noir.

One is the opening sequence, set in "a particularly dingy part of dockside London" (*Kinematograph Weekly* 1949, 2181: 18), and featuring the police's chase of Bill who, that same night, had accidentally killed a man in a pub. In order to escape the authorities, Bill climbs into Jane's bedroom from an open window, causing her to wake up, terrified. A dark atmosphere and a sense of danger, all distinctive elements of film noir, are therefore present right from this opening. The depiction of the two protagonists' first encounter, too, is of special interest: it shows gloomy tones, and also originality. The scenario is far removed from that of the traditional meeting between a nurse and a soldier as patient, a stereotypical

image more often displayed in melodramas and comedies but, sometimes, also in film noir. Exemplary in this respect are noir nurse Julie Benson (Virginia Mayo) and Bob Corey (Gordon MacRae) in Vincent Sherman's *Backfire* (US, 1950), Julie's love story with veteran Bob beginning while he is hospitalised at the Birmingham Veterans' Hospital in Van Nuys, her workplace.

Moving back to *Kiss the Blood off My Hands*, after their high-tension meeting, Jane promises Bill she will not report his intrusion to the authorities, provided he lets her go to work, and then leaves. Bill accepts; however, he realises he has fallen in love with Jane. Thus, he secretly follows her to the zoo: this vaguely bucolic environment marks the beginning of Jane's interest in Bill, and her understanding of his behavioural problems, deriving from his experience as a prisoner in a German labour camp. Bill's gallant invitation to horse racing follows: there, however, he meets Harry Carter, the hoodlum who witnessed Bill's involuntary murder in the pub, and threatens him with blackmail. This event opens the film's second, darker part: after the race, Bill impulsively assaults a man, being sentenced to six months in prison. Upon his release, Bill and Jane meet again, and she offers him work as the hospital's supplies driver. Harry proposes Bill to steal medicines for his black market business, an offer that Bill accepts reluctantly. On the night of the crime, Jane however asks Bill to take her to some patients in the countryside, which he welcomes – thereby letting Harry down. Love blossoms. Contextually, Harry is no longer feasible, and desires revenge: he assaults Jane, who stabs him in self-defence. Finally, Bill kills Harry, and suggests to Jane that she escapes with him. On the way to the harbour, remorse overwhelms Jane. The film ends with the two hugging each other, on

their way to the police station.

As this plot suggests, Jane represents a particular case of the nurturing woman. On one hand, her actions are spurred by the desire to redeem Bill. This complies with Fontaine's dominant star image, where male characters' "redemption" and "vulnerability" are defining aspects (Lightfoot Garrett 2005). On the other hand, Jane's redeeming attitude is what makes her involved in the criminal scene, eventually committing a crime. "Having a record" prevents her full identification with the traditional nurturing woman: she represents a variant of it, overall but not totally good. In this lies the essence of Jane's ambiguity, which I here define as her "quasi-nurturing" nature. Significantly, such "quasi-ness" again suggests that the nurse, in each and every instance, complicates genre by simultaneously accentuating and detracting from traditional generic conventions of femininity. Indeed, as I mentioned, Jane is not unique among film noir good nurses: the quasi-nurturing nurse, with her ambivalent characterisation, marks other noir plots.

An example is private nurse Anne Graham (Margaret Lockwood) in Carol Reed's *The Girl in the News* (UK, 1940). Anne is considered one of the main culprits in two of her patients' death – a psychopathic old woman and a rich invalid. Everyone, including Anne's barrister Stephen Farrington (Barry K. Barnes), is doubtful about her innocence: all evidence seems to corroborate her guilt. Despite this, Stephen – who has meanwhile fallen in love with Anne – decides to trust her, defending her case until the last trial, when the truth comes out: Anne is innocent, and her suffering "rewarded" with Stephen's love.

Though the spectator is aware of Anne's innocence, the equivocal situations

she is involved in and the genre's characteristics elicit a sense of suspense and doubt. *The Motion Picture Herald* acknowledged this: “unlike the conventional 'whodunnit', this [...] murder drama resolves itself into the 'howcanshegetawaywithit' category”, remarking, “the problem” is “how that sweet young charmer into the nurse's uniform will escape the gallows” (1940 141, 2: 50-2). Thus, ambiguity is a pivotal feature also in Anne’s case. Anne is a sort of “innocent criminal” and yet not a “female victim” – another feminine type in film noir “whose terror, paranoia and neuroses are induced through the [...] behaviour of the 'homme fatal'”, and which “Fontaine's insecure heroines in *Rebecca* (1940) and *Suspicion* (1941)”, amongst others, epitomise (Spicer 2002: 93). Anne therefore is another example of the quasi-nurturing nurse.

Besides Jane and Anne, in 1945 Hollywood produced another quasi-nurturing noir nurse: Eilene Carr (Nina Foch) in Budd Boetticher's *Escape in the Fog*. Eilene’s romance with Barry Malcolm (William Wright), an expert in psychological warfare living a perilous life, “corrupts” her nature as a nurturing woman. As is often the case with good women, and with quasi-nurturing noir nurses, Eilene's dedication and courage are finally “rewarded”: she survives together with Barry.

Before proceeding with my analysis of quasi-nurturing Jane, I shall touch briefly on other noir nurses, in turn ambiguously representative of the “good woman” stereotype. A first example is Maria Marcelo (Gina Lollobrigida) in Basil Dearden's *Woman of Straw* (UK, 1964). Maria epitomises the “the good-bad girl”, a female type who “combines the sexual stimulation of the *femme fatale* with the fundamental decency of the homebuilder” (Spicer 2002: 92). Maria fits into this

categorisation insofar as her narrative trajectory is overall similar to quasi-nurturing Anne's: Maria is also unjustly accused of murdering millionaire Charles Richmond (Ralph Richardson), her old invalid husband and former patient. However, unequivocal *femme fatale* attributes confusingly go hand in hand with her innocence. Her provocatively beautiful appearance contrasts with the nurturing female archetype's "almost asexual" nature, which Spicer (2002: 91) has theorised. Ambiguity is also crucial, seen in her liaison with her husband's criminal nephew Anthony (Sean Connery). Lollobrigida's star persona plays an influential role, too. Lollobrigida belonged to the "rosy" Neorealist "beauty queens [...] the vital signs of [...] the erotic female Italian body to the body of film" (Landy 2008: 109), and is identified with the sensual *maggiorata fisica* – discussed in relation to Silvana Mangano. Despite her hybridity, Maria's character is eventually recognised as good: by the end of the film, she is proven innocent, whereas the real killer, Anthony, is not only identified as such, but also punished with a fatal accident.

Maria's hybrid goodness finds even more extreme embodiments in Ann Sebastian (Coleen Gray), the ward nurse in George Sherman's *The Sleeping City* (US, 1950), and in private nurse Louise Howell (Joan Crawford) in Curtis Bernhardt's *Possessed* (US, 1947). A sort of documentary noir, *The Sleeping City* opens with the mysterious murder of a doctor, and revolves around the investigations Fred Rowan (Richard Conte) develops undercover as new intern Fred Gilbert. Fred collaborates with dedicated nurse Ann, whom he befriends. Eventually, Ann turns out to be implicated in an illegal drugs ring, headed by the hospital's elevator operator Pop Ware (Richard Taber). The film ends with Fred

killing Pop in self-defence, and Ann's arrest. Although Ann is treated as a “bad” character, being punished for her crime, the reason behind her misdeed helps towards her redemption. The money she earned by working as a courier for the black market, stealing drugs prescribed for patients, was destined to support her sister's sick child. In this light, Ann's misdemeanour appears less deplorable, which makes it possible to define her with “borderline goodness”.

Crawford's nurse Louise in *Possessed* (1947) is also a highly hybrid character. The Kalischs (1987) argue: “apparently a good, competent nurse”, Louise “clearly found no personal fulfilment in her work and spent all her emotional and mental energies in a quest for perfect love” (p. 136). Thus, Louise's struggle for love, expressed stylistically in highly melodramatic fashion (through costume and music as well as Crawford's glamorous star persona) undermines her potential as a nurse. Her mental illness – schizophrenia – further complicates her profile as it makes her unable to control her actions. Louise cannot forget her former boyfriend David Sutton (Van Helflin), even though he left her years before. Though obsessed with David, she marries her deceased patient's husband Dean Graham (Raymond Massey), who also works with David. When the latter considers marriage with Louise's stepdaughter Carol (Geraldine Brooks), Louise kills him.

It is noteworthy that in her pioneering book *The Desire to Desire* (1987), about female audience's identification with the 1940s woman's film's characters, Mary Ann Doane excludes Louise from this identification process: “the spectator's eye becomes that of a doctor, and the spectator is given, by proxy, a medical or therapeutic role [...] the spectator always knows more than the female

character, is always an accomplice of the diagnosis” (p. 57). Thus, Louise’s “badness” depends in large part on her acknowledged mental instability: this, to some extent, lessens her guilt as a murderer; her character is characterised by “borderline badness”.

As we saw, the representational repertoire of good noir nurses is varied, though the quasi-nurturing nurse’s figure seems predominant. Somehow, this image also applies to nurse Stella (Thelma Ritter) in Alfred Hitchcock’s *Rear Window* (US, 1954), although her overall characterisation is more hybrid, and the film can only tangentially be described as noir (though it is a thriller). Stella has a composite caring function: she is in charge of protagonist L. B. Jeffries’s (James Stewart) physical recovery, and one of his main advisors. This supportive role is what determines Stella’s “quasi-ness”: her humorously cynical guidance results in her strategic contribution to the case Jeffries investigates from his window.

Another hybrid example of the quasi-nurturing woman is the already mentioned nurse Julia in *Backfire*: her characterisation, like Stella’s, also fits the nurse-detective’s figure. As a quasi-nurturing woman, Julia is involved in crime because she wants to help her beloved Bob Coney to exonerate his best friend in relation to an accusation of murder. However, her active commitment to the investigation, up to the point of risking her own life to solve the case, recalls the detective’s image, too, thereby rendering Julia a further example of a “good” noir nurse.

In light of all this, the next part of my study aims at describing how the image of the good, quasi-nurturing nurse is conveyed, taking Jane in *Kiss the Blood off My Hands* as the case study.

Jane's first portrayal in the film features the scene where Bill enters her room incognito, in the middle of the night. Jane is immediately identifiable as different from the *femme fatale*. Unlike the latter, Jane is detached, not sexually captivating. Meanwhile, she appears strong – an impression dialogue reinforces, as she firmly states she is “not scared”, and imposes her conditions on stranger Bill. Thus she is not associated with the “female victim's” figure either.

Jane's firmness and stamina are evoked, for example, in the close-up where she stares at (off-screen) Bill (figure 3.22). Her face is partly turned away and downcast, and only illuminated on the side facing the camera. These combined elements draw attention to her dark eyes, and serious and impenetrable gaze, communicating a sense of detachment and courage. Contextually, the chiaroscuro effect surrounds Jane with a mysterious aura, here reinforcing the idea of her strength.

Jane's goodness is also reflected in her decent manners and decorous outfit, as illustrated by her conversation with Bill following their turbulent encounter (figure 3.23). The two characters are shot opposite each other, allowing us to appreciate Jane's behaviour when facing Bill. Despite her background position, Jane has a key role in the image: her body, unlike Bill's, is fully visible. The composition of the image and lighting, as well as Jane's clear clothing, call attention to and single out her figure: she appears resolute and distant. Several elements suggest this: one is her rigid stance, which her stiffly bent arms – she fixes her neck-ribbon to hide her breast, thus also evoking modesty – mirror; another clue is her unwavering expression. Overall, she appears neither scared nor provocative.



Figure 3.22



Figure 3.23

This scene also offers a glimpse of Jane's (still uncorrupted) nurturing nature: before going to work, she asks Bill whether he would like some tea, and even volunteers to go collect some milk down the road. Jane is shot in profile (figure 3.24), in the foreground. This position emphasises her caring attitude, pouring the drink into Bill's cup. He observes her from a distance, standing in the background.

An even more typical representation of Jane as a nurturing woman is provided shortly before her tense meeting with racketeer Harry, when she stops in the countryside with Bill, coming back from the drugs' delivery. Here, Jane fully complies with Place's (1998) definition of the nurturing woman. The scene is set in "a pastoral environment of open spaces, light and safety" (p. 60) (figure 3.25). Adhering to the "traditionally nurturing" traits Place outlines, Jane expresses her love for Bill explicitly, kissing him for the first time, and asking him not to leave her (p. 60).



Figure 3.24



Figure 3.25

The medium close-up of Jane and Bill's passionate hug (figure 3.25) encapsulates all of the above. Flowering tree branches mark the picture's nurturing and romantic symbolism. The lovers' tight embrace conveys ideas of love and mutual need, which composition enhances. Because of their closeness, Jane and Bill's bodies appear as one, their arms seemingly wrapping their figures. Their prominently displayed hands add to this romantic posture's visual impact. Contextually, the contrasting colours of the lovers' clothing help single out the characters' individuality, also sustaining a sense of reciprocity and mutual support.

Shortly after the scene examined above, however, Jane's nurturing nature alters: following Harry's unexpected visit, and his provocations and threats, she stabs him in self-defence. A medium close-up (figure 3.27) highlights her reaction: she faces the camera unlike Harry, of whom one can only see a shadowy back profile. Jane is scared, but can control her emotions: she sighs, and her expression is tense, as her partly open mouth and furrowed eyebrows reveal; yet, she looks Harry straight in the eye, thus proving evidence of her courage.



Figure 3.26



Figure 3.27

The greatest emphasis on Jane's courage comes when the camera cuts to focus on her hand grasping a pair of scissors (figure 3.28), the prelude to her violent action, and also the moment when her nurturing nature gives way to violence. Revealingly, Jane's act of stabbing is not displayed: what the spectator sees is its effect on Harry, who falls to the floor in agony, on top of her. A medium shot captures Jane (figure 3.29) leaning against a table, with one hand on its surface and the other tenaciously holding the blood-stained scissors, her arm rigidly bent at breast level. Although it is unclear whether Jane looks at the scissors or at Harry, her gaze being downcast, her overall posture, leaning forward, and stiff facial features suggest upset and shock.



Figure 3.28



Figure 3.29

This event marks Jane's new status as a quasi-nurturing woman, but does not preclude her from being identified as good: in the aftermath of her impulsive action, she is immediately overtaken by a deep sense of guilt, which not even the awareness of having acted in self-defence can suppress. This reaction evidently distinguishes Jane's character from the *femme fatale*, devious and unscrupulous by definition, up to the point of denying the clear evidence of her misdeed, as *Calling Doctor Death's* Stella demonstrated. By contrast, and notwithstanding the consequences this choice may entail in her love story, Jane does believe that confessing her crime to the police is the only thing that can truly give her relief, and thus also enable her to make the most of her relationship with Bill, who must follow her example to redeem himself.

The closing scene (figure 3.30) depicts this crucial moment, in which the partners choose not to escape from the city, heading instead for the police department. The camera captures them in long shot and in profile, while they walk hugging each other. Despite the dark surroundings, Jane's face is visible and enhanced by lighting. She looks at Bill and smiles, expressing gratification and fulfilment: no matter what their punishment will be, she knows this act of giving themselves up will atone for their guilt and enable them to regain happiness.



Figure 3.30

The analysis of *fatale* nurse Stella Madden and of quasi-nurturing Jane Wharton, respectively emblematic of the two main types of “badness” and “goodness” characterising nurses in film noir, has drawn attention to a number of issues. One is that most noir nurses are overall good women. As we saw, with the exception of Stella in *Calling Doctor Death* and of nurse Elaine Jordan in *Shock* – both *fatale* nurses – and, in a sense, of nurse Ann Sebastian in *The Sleeping City* and nurse Louise Howell in *Possessed*, representing “borderline” cases of “goodness” and “badness”, respectively – the other nurses featured in the films noir examined here are characterised as either detectives, “good-bad girls” or, in most cases, quasi-nurturing women: diverse expressions of the good woman.

The good nurses’ prominence in 1940s and 1950s film noir is in line with the representational trends that, during the same decades, distinguished the professional category in other genres, for example the biopic and the melodrama, as chapters one and two reveal. This tendency to promote nurses’ images that can appeal to a female audience sees several factors as influential. One is the profession’s history. As I discussed earlier, with the outbreak of WW2, nurses’ recruitment became a vital requirement in America and Britain. Moreover, with a

shortage of nurses marking the conflict's end, recruitment propaganda continued from the late 1940s to the 1950s. In this light, film noir's portrayals of good nurses may be conceived, in turn, as part of the overall cinematic contribution to the recruiting cause, albeit indirectly in the case of film noir.

The contrast between film noir, a genre often depicting women as "bad" individuals, and the biopic and melodrama – the latter traditionally defined as a "feminine" genre, normally exalting images of womanhood and addressing female spectators – calls attention to a further question: who was the intended audience for these noir productions? It is relevant that the "good" noir nurse I examined, Jane, is played by Joan Fontaine, one of the most important stars of 1940s Hollywood, known for her ability to "enact the passive woman" as well as for her "patrician beauty, elegance and refinement" (Lippe 1992, p. 356); as a result she was often cast in psychological thrillers and romantic melodramas. This suggests that film noir like *Kiss the Blood off My Hands* aimed, like the biopics and melodramas previously examined, primarily at a female audience. Fontaine's presence in the film also explains the unusual (though appealing) "goodness" of the character she plays.

In the films noir under consideration here – and, more generally, in thrillers – white ideals of respectability predominate in the representation of women: film noir nurses are exclusively white. It should be said, however, that this is a general feature of film noir. As E. Ann Kaplan (1998) argues, "race is film noir's repressed unconscious Signifier" meaning that "critics could, theoretically, have translated the term and talked about 'black' film. But that would have forced us to confront the problem of 'black' as a category we were still 'forgetting' about" (p.

183). Similar views on the “whitening” of film noir are echoed in Jans B. Wager’s “Racing the Paradigm: The Whiteness of Film Noir” (2005), amongst other works.

Following on from this, we need to examine the special way the representation of nurses conveys the idea of goodness in film noir, with ambiguity a salient trait. Ambiguity – though in diverse forms and at different levels – turns out to be a feature all the nurses of film noir share, notwithstanding their being “bad” or “good”. This implies a conceptual continuum between the two female types, by virtue of which none of the film noir’s nurses can be truly identified as wholly “good”. Similarly, wholly “bad” nurses are rare: Elaine Jordan in *Shock* is the only unambiguous *femme fatale* I came across.

These nurses’ distinctive ambiguity is understandable in terms of the nature of film noir. Surveying the literature on the genre, even those who have offered challenging readings of it, like James Naremore (1998), identify the idea of “darkness”, and all its implications, as “the central metaphor of [...] film noir” (p. 7). Hence, its characters’ “bleak evocation is driven [...] with that which is mysterious, unknown, and often [...] unknowable” (Stern 1994: 159) – thus ambiguous and equivocal. From this angle, then, good nurses in film noir, with particular regard to the “quasi-nurturing” category, may be plausibly identified as representative products of the genre, arguably more emblematic than the “simply” nurturing noir woman or the wholly “bad” *femme fatale* by virtue of their ambiguity.

The special relationship between the nurse and the thriller, as previously indicated by the Kalischs (1982c), also lies in the fact that nurses are particularly

suitable subjects for the construction of mysterious characters. The environment they work in is inevitably related to illness and death, and the responsibilities they take on by virtue of their job include assisting patients and, thus, also having access to drugs and harmful medical tools. As a result, nurses have recurrently featured in the “genre”: my filmography includes around 40 mystery productions depicting nurses. Although most of these films date back to the 1930s, 1940s and early 1950s, it is significant that the “nurse-thrilleresque” combination has resurfaced from the late 1990s onwards.

A film worth mentioning is Robert Malenfant's dramatic thriller *The Nurse* (US, 1997), with nurse Laura Harriman (Lisa Zane) plotting revenge against the man she blames for having driven her whole family to death. Becoming his private nurse, Laura is given the chance to kill him and his family. An emblematic “bad/killer nurse” taking advantage of her profession, Laura finds, however, “good” counterparts in characters like Neil LaBute's *sui generis* “female victim” nurse Betty (Renée Zellweger), in the eponymous gangster movie/comedy (US, 2000). Betty is a waitress who happens to witness her husband's murder and, consequently, becomes mentally unstable, suffering from “dissociative fugue”. Platonically in love with the doctor-protagonist of her favourite soap opera – which may be seen as a “postmodern” version of the traditional nurse/doctor liaison – Betty decides to look for him, becoming in her mind a nurse on the TV series. Meanwhile, her deceased husband's killers seek her. Thrills, romance and comedy mark Betty's adventures up to her mental recovery, when the two gangsters attempt to kill her. The film ends with Betty's decision to undertake a nursing career.

Ambiguity is a distinctive trait of the “trilleresque” nurses, which arguably renders their portrayals less appealing and more threatening than those analysed within biopics and melodramas. However, as we will see, even less appealing and reassuring depictions of these professionals are offered in horror thrillers, comedies and sexual-comedies – from the late 1950s, especially. In these productions, the image of the nurse is indeed exploited either in terms of monstrosity, the grotesque or sexuality.

The representation of women within the mystery genre as *femmes fatales* relies on ambiguity, a trait which diminishes their *fatal* aspect, depends to a large extent on the women’s identity as nurses. The profession’s high esteem during the Great Depression, as well as the nurses’ recruitment goal characterising America and Britain during WW2 and its aftermath, support this hypothesis. Casting further reinforces this point: the actresses playing nurses often are particularly popular with female spectators, adding glamour and cultural capital to the screen nurse. The nurses of 1930s detective thrillers and 1940s and 1950s film noir thus present a felicitous combination of social, cultural and genre ingredients, offering overall appealing screen versions of the profession.

3.3 Nurses in Horror Thrillers

My account of the image of the nurse in thrillers finishes with an overview of her representation in horror films. Compared to the other genres I consider in my study, the horror film is one of the least prolific in terms of the presence of nurses. Although my corpus of American, British and Italian productions includes around 20 horror films featuring these professionals as (co-)protagonists, most of

these cannot be labelled “pure horror”, and the nurse’s sexual component is highly prominent, sometimes as much as the horror aspect. While the Kalischs’ and Hallam’ studies overall neglect horror films, Stanley (2008) identifies the genre as the third most prolific in terms of the representation of nurses amongst those he examines; however, his investigation only includes 17 horror productions in his international filmography.

A first, peculiar point in Stanley’s analysis is the complete lack of horror films depicting nurses before 1970. Considering that the horror film dates back to the silent era – the genre’s genesis being even earlier, as attested in “the forms of literary and theatrical horror that pre-existed the emergence of the cinema” (Jancovich 2002: 3) – Stanley’s study is misleading. Indeed, horror films featuring nurses can be found in the 1940s, 1950s and 1960s. Notably, Jacques Tourneur’s classic horror film, *I Walked with a Zombie* (US, 1943), is included in Stanley’s (2008) filmography, though categorised amongst “zombie issues” (pp. 87-90).

This section aims to highlight the type of portrayals characterising the nurse in horror films. Besides contributing to the debate on women and horror, an important theme of feminist film criticism from the late 1970s, my analysis will also explore a somewhat neglected subject within the realm of nurses’ media representations: most studies of nurses in exploitation cinema tend to focus on the sex-kitten/battleaxe pair. Among my goals is the consideration of alternative types of exploitative depictions.

Barbara Creed (1994b) – author of a key reference within feminist studies of the horror genre – contends: “horror has enjoyed the unusual status of being both one of the most popular yet most denigrated of film genres” (p. 206). The horror

film's constant innovation throughout the decades has contributed to its enduring popularity. Although the Hollywood horror film's golden age is usually associated with the 1930s, the 1940s saw the release of classics like Jacques Tourneur's *Cat People* (US, 1942) and the aforementioned *I Walked with a Zombie* (US, 1943), with its nurse Betsy Connell (Frances Dee). The 1950s witnessed the apogee of remakes by American director Roger Corman and British Hammer Studios, whereas in the 1960s Albert Hitchcock inaugurated the so-called "psychological horror" film. The 1970s marked the genre's resurgence of interest in the gothic novel, Surrealism and German Expressionism, but also the development of "splatter movies" and of "women in peril" exploitation films.

Although the horror film's critical appreciation officially started in the 1950s – generally registering negative responses except in France, where the genre was appreciated as an example of the *fantastique*, as Leila Wimmer (2008) indicates – feminist film criticism engaged with it only in the late 1970s. Overall, feminist film theorists stigmatised the genre for treating women as monsters, or else "as victims, their bleeding, battered bodies depicted in graphic detail, indicating that pleasure in viewing is linked directly to the representation of violence against women" (Creed 1994b: 207). Among feminist film scholars, Creed (1993) stands out for her theory of "the monstrous-feminine", the female stereotype through which she challenges the dominant (and patriarchal) interpretation of women in horror films as described above, arguing: "in a significant number of horror films [...] the monstrous-feminine is constructed as an active rather than passive figure" that "speaks to us more about male fears than about female desire or feminine subjectivity" (p. 7). Crucial to Creed's argument

is Julia Kristeva's 1982 theory of the abject and the maternal, and other studies of “female monstrosity”, including by Stephen Neale (1980), Susan Lurie (1981-2) and Linda Williams (1983).

The “female victim”, which ends up embodying monster-like features (Neale 1980, Lurie 1981-2, Williams 1983), defines most nurses portrayed in my horror film corpus. Amongst the earliest examples is nurse Susan Drake (Lorna Gray as Adrian Booth) in Philip Ford's *Valley of the Zombies* (US, 1946), a B-movie produced by Republic. Since its release, critics have largely neglected this film: the only commentaries on it I found are contemporary, and mainly posted on fan blogs (Film Obscurities) and websites (Fantastic Movie Musings & Ramblings) about the horror genre. These online accounts provide fairly negative feedback on the film, pointing out several inconsistencies. One is the weak connection between the title and the story, about which the website “Fantastic Movie Musings & Ramblings” comments: “the Valley of the Zombies of the title is only referred to in passing; there's only one Zombie, and he acts more like a vampire”.

Leaving aside its artistic value, *Valley of the Zombies* is relevant to my investigation. It features Nurse Susan, attempting to solve the mystery behind the several murders and thefts of blood that have occurred in the hospital where she works, and who then becomes herself a victim of Ormand Murks. Because of his obsession with blood transfusions, Murks had been hospitalised years before in a mental institute, and died for unexplained reasons during surgery. Before dying, he had deliberately required no autopsy, and also engaged with voodoo practices: this enables his dead body, eventually, to transform into a zombie. “Vampirically”

obsessed with blood as he was in his previous life, towards the film's end Murks kidnaps and hypnotises Susan, to obtain her blood. The zombie controlling Susan's mind leads her to attempt to shoot her boyfriend who, typically, is a (male) doctor, Terry Evans (Robert Livingston). Evans and the police had followed Susan and Murks up to a rooftop. In the happy ending, good prevails over evil: the police kill Murks, and Susan, recovered from hypnosis, is able to join Evans.

Being hypnotised by Murks, and thus subdued to his will, Susan may be plausibly identified as an example of Creed's (1993) "woman as possessed monster", namely "a girl/woman possessed by the devil" (p. 31), and one of the variants of "monstrous feminine". Several of the horror film featuring nurses I examined fit this categorisation, although through diverse modalities, and different degrees of "monstrosity". This assumed, Susan embodies the "woman as possessed monster" image only up to a point. She does not reflect "the graphic detailed representation of bodily destruction" (p. 31), for example displaying "bodily excretions" (p. 38): outwardly, Susan is unspoilt, and actually beautiful. This point, to which I will return shortly, suggests, rather, Susan's identification with what Creed defines as "the feminine evil – beautiful on the outside/corrupt within" (p. 42). Significantly, Susan's inner corruption is only momentary: Murks' death frees her from his evil control – which had rendered her "passive", unlike the canonical "monstrous feminine", identified as an "active figure" (p. 7).

Valley of the Zombies' best expression of Susan's evil possession takes place in the final scene. A solemn "she is mine" by Murks precedes his escape with Susan to the rooftop. Evidently aiming to intimidate Evans, Murks's

statement also clearly marks his control over Susan. The camera alternates three quarters shots of Murks (figure 3.31) with images of Susan, shot from different distances. A devil-like figure, Murks is surrounded by darkness, and his outfit clearly recalls Dracula's. Murks's highest embodiment of wickedness comes when he orders Susan to kill Evans: "now, my dear, you may shoot him!". The camera cuts to a medium close-up of Susan (figure 3.32): standing, she slowly raises her hand holding the gun, with the rest of her body still. She is possessed by the devil: her slow movements, as well as her vacant and inexpressive eyes convey this idea.



Figure 3.31



Figure 3.32

Susan's case raises a number of questions. Although most nurses portrayed in horror films are possessed by an evil entity, few are outwardly as uncorrupted as beautiful Susan. Once again, America's nursing recruitment at the time of *Valley of the Zombies'* release may explain this: Susan's untainted glamorous looks and fashionable clothes would have appealed to potential nurses. Susan's outfit fits indeed the 1940s fashion (See: Baker 1991). Her narrative trajectory also reflects her positive aura: unlike the other horror film nurses possessed by a monster, she does not die. In fact, she is granted the victim status of a "good"

melodramatic heroine, “rewarded” at the end, while evil Murks is “punished”.

Susan’s identity as a nurse is key to this. On a narrative level, working in the hospital is what determines her involvement in the case; her commitment to fighting against the murderer/thief Murks makes her also embody the nursing ideal of self-sacrifice, as she does this for the welfare of others, risking her own life. Images magnify Susan’s “angelically altruistic” nature even when she is possessed by evil Murks: she wears white clothes even when not in uniform, standing out from the darkness – an effect enhanced in a medium close-up of her (figure 3.32). The whiteness of Susan’s clothing contrasts with Murks’s Dracula-like black outfit, further underlining the good/evil dichotomy the two colours traditionally symbolise.

The alternation between images of the devil and those of his nurse/victim in the scene above are found in a major horror film, shot later in Italy: Mario Bava's *I tre volti della paura/Black Sabbath* (IT, 1963). Before focusing on this film, and on the horror genre’s importance in 1960s Italy, however, it is worth mentioning two productions contemporary with *Valley of the Zombies*, one American and one by British Hammer Studios, which include nurses: Paul Landres's *The Vampire* (US, 1957) and Freddie Francis's *Nightmare* (UK, 1964). *Nightmare*’s nurse protagonist, Grace (Moirá Redmond), is of special interest: unlike most nurses depicted in the horror genre, she is not a victim, but a *femme fatale*, one of the film's evil characters, and she is eventually punished.

Turning back to Italian horror, Bava is one of its most representative directors. Italy's true engagement with the horror genre started in the late 1950s: both Peter Bondanella (2009) and Gian Piero Brunetta (2009) emphasise that in

the first half of the 20th century, Italy saw the release of only one horror film – a point that turns out to be wrong, since Bondanella and Brunetta refer to different productions: Testa's *Il mostro di Frankenstein/The Monster of Frankenstein* (IT, 1921), and Alessandro Blasetti's *Il caso Haller/The Case of the Baron Haller* (IT, 1933), respectively². Interestingly, a similar situation distinguishes Italian cinema's approach to the western: this genre only became important in the late 1950s, with Sergio Leone's launch of the so-called “Spaghetti Western”. Hence, the “Spaghetti Nightmare” label to indicate Italian horror film – which scholarly criticism, however, has also defined as “classic” (Bondanella 2009: 306-7).

Bondanella and Brunetta identify in post-war Italy's economic recovery, from which the cinema industry also benefitted, the core reason for the country's late commitment to the two genres. Italian horror B-movies, which Brunetta (2009) considers “indicative of the new commercial trend in Italian cinema during the 1960s” (p. 198), found a major audience in the US:

American International Pictures (API) and Roger Corman popularized the horror genre [...] This company would eventually distribute many of Italy's genre films in America. API had discovered the youth market: the American drive-in became the perfect venue for B films in the horror genre, and Italian genre films would eventually profit from the market they cultivated (Bondanella 2009:

² Besides, Alex Marlow-Mann (2011) refers to Guido Brignone's *Maciste all'inferno/Maciste in Hell* (IT, 1925) as a rare silent horror.

307).

Bondanella (2009) and Brunetta (2009) also stress the importance that British Hammer productions – Terence Fisher's *The Curse of Frankenstein* (UK, 1957) and *Dracula* (UK, 1958), especially – had in reviving Italy's interest in the horror genre. Brunetta (2009) argues: “When Terence Fisher released his *Dracula* [...] Italian cinema was in a phase of rapid growth: it seemed only logical, from a financial point of view, to produce near perfect imitations that were virtually indistinguishable from the original” (p. 198).

Brunetta identifies in these Italian horror films' lack of “any identity or continuity with the Italian tradition of filmmaking” a reason for the genre's scarce critical appreciation and its primarily American fans (p. 198). Bondanella (2009), however, concedes: “spaghetti nightmare' [...] achieved international cult status, and now continues to attract viewers on DVD as well as testimonials by contemporary horror directors as to its impact on their own works” (p. 307).

Recently, feminist film scholar Donna de Ville (2010) has offered new readings of the impact of Italy's social and cultural history on the horror genre. De Ville sees in director Dario Argento – often associated with Bava – clear references to an “Italian mentality”. Drawing on Creed's theory of “the monstrous-feminine”, de Ville argues that Argento's female characters often are “malevolent mothers” (p. 53). From a psychoanalytical angle, this figure – especially pivotal in Argento's “Mother trilogy”, of which *Inferno*, with Bava in charge of special optical effects, is part – is emblematic of the mother figure as conceived within Italian families: an “omnipotent” woman (p. 61). De Ville considers the

importance of motherhood in Italian horror film as the result of the Catholic Church's influence on Italian society; her study will be useful to my analysis of the Italian horror nurse, as nursing and caring contain motherly connotations.

Turning back to the “spaghetti nightmare” series, the first film identified as such came out in 1956: Riccardo Freda’s *I vampiri/Lust of the Vampire*, with Bava as the cinematographer. Other famous directors followed: Argento, Lucio Fulci, Ruggero Deodato and Umberto Lenzi. Bondanella (2009) argues: “Bava surely deserves to be compared favourably with [...] Italy's auteurs who dominated the 1960s” (p. 311). Before his 1963 *I tre volti della paura*, my case study, Bava achieved international fame with *La maschera del demonio/Black Sunday* (IT, 1960) and *La frusta e il corpo* (“The Whip and The Body”, IT, 1963). His filmography also includes *Operazione paura/Kill Baby Kill* (IT, 1966), *Gli orrori del castello di Norimberga/Baron Blood* (IT, 1972), and *Lisa e il diavolo* (“Lisa and The Devil”, IT, 1972).

I tre volti della paura contains three episodes, with nurse Helen Chester (Jacqueline Pierreux) as the protagonist of its third tale (or first, depending on the version): “The Drop of Water”. Critics have identified *I tre volti della paura* as one of Bava's most influential pictures, despite the re-editing and censorship API imposed. Of the three horror tales – “The Telephone”, “The Wurdalak” and “The Drop of Water”, respectively adapted from Guy de Maupassant’s, Alexei Tolstoy’s and Anton Chekov’s stories – “The Drop of Water” has been often identified as “the film's outstanding episode” (Marlow Mann 2011: 158-9, *see also*: Newman 1986). Its plot is fairly simple: nurse Helen steals the ring of a dead female medium she prepares for burial. Back at her place, alone at night, Helen

sees the deceased, who reclaims the ring. Helen cannot survive the meeting, seemingly strangling herself while the dead medium advances towards her.



Figure 3.33



Figure 3.34

Kim Newman (1986) defines the scene of Helen's persecution as “a fine example [...] of pure cinema [...] as the central character is driven out of her mind by décor, lighting effects, garish colours, camera movements, and crashing sound effects” (p. 24). This also affects the moment of Helen's death, mainly based on the alternated framing of the dead medium's (figure 3.33) and Helen's figures (figure 3.34). As in *Valley of the Zombies*' nurse Susan, framing helps convey a sense of evil possession, supporting the final, symbolic association of the monster and its victim as one single entity. In *I tre volti della paura*, Helen's seeming physical contact with the zombie-medium further reinforces this impression – unlike in *Valley of the Zombies*, where Murks “controls” and spurs Susan's action from a distance. Bava's experience of the genre as a director produces a vivid and pervasive sense of horror and monstrosity, by visually emphasising Pierreux/Helen's deadly expression, complete with her vacant eyes, slightly twisted mouth, and rigid facial traits (figure 3.34).

Although identifiable as another example of the horror film's female victim – Helen is possessed by an evil entity and, eventually, killed – Helen arguably is not as innocent as *Valley of the Zombies*' Susan. Unlike the latter, Helen is the perpetrator of a theft, the reason for the evil zombie-medium's revenge. Helen's apparent self-strangling and death may be intended as punishment for her “evil” deed. In a 1972 interview Bava suggested Helen's association with a monster:

I'm especially interested in movie stories that focus on one person [...] What interests me is the fear experienced by a person alone in their room. It is then that everything around him starts to move menacingly around, and we realise that the only true 'monsters' are the ones we carry within ourselves (quoted in Shipka 2011: 47).

Bava's words aptly fit “The Drop of Water's” scenario, not least because a main theme of the sequence at Helen's house is the terror ordinary domestic sounds – amongst which the dripping tap featured in the tale's title – generate.

Both a guilty victim, punished with death for her misconduct, and the victim of a monster's revenge, eventually subject to a brutal destiny, horror nurse Helen is a version of the traditional female victim, significantly marked by ambiguity. This trait, as we saw, is distinctive of most “thrilleresque nurses”, and can be linked to their belonging to the nursing profession.

De Ville's argument on the treatment of women in Italian horror films is useful in this respect. Bava's nurse is an example of woman as possessed monster

in the mould of the Italian malevolent mother de Ville (2010) theorises. Though not a mother, Helen is a nurse and, thus, a caring maternal figure. That said, Helen is not as malevolent as the mothers de Ville discusses – “sexually transgressive characters and maternal/female killers [...] matriarchal monsters neither nurturing nor maternal” (p. 53). Leaving aside the stealing of the dead medium's ring, Helen's only truly “malevolent” feature, she appears as overall decent.

“The Drop of Water” episode opens with Helen being asked to reach the dead medium's house, in the middle of the night. At first, she finds the request annoying, stressing that she is not even paid for the service; nevertheless, she goes. At the deceased's house, Helen complies with her duty, changing out of the medium's clothes for burial and, thus, having physical contact with the latter. In this she is unlike the medium's fearful housekeeper. Helen, thus, also appears courageous, although the medium's ring clearly encourages her actions.

It is worth remarking that de Ville's (2010) argument refers to productions released about a decade after *I tre volti della paura*, at the peak of Italian feminism. This phenomenon was particularly influential in Argento's depiction of women, with special reference to their “transgressive” aspect, de Ville argues (pp. 70-1). In this light, Helen's “moderately” malevolent nature is more intelligible: the film was indeed released in 1963, before Italy's feminist era.

Helen is also less malevolent than other contemporary female characters in Bava's films, for example Barbara Steele's witch Asa Vajda in *La maschera del demonio* (1961), where Steele also plays “victim” Katja, one of Asa's descendants. These two female characters' symbolism is, however, unequivocal: Asa is the “evil”, and Katja is Asa's “good victim”. Helen's case is different: she cannot be

defined in black and white terms of “goodness” or “badness”. It is thus possible to identify Helen as an ambiguous type of “malevolent mother”: being a nurse is clearly essential to this. Nursing determines Helen's association with the idea of motherhood (See also: Humphries 2007), and her compliance with the profession's exercise contributes to soften her criminal side.

Following Bava's contribution to the representation of nurses in horror film, the 1970s and 1980s saw the release of several films, mainly American, in which the sexual component was as prominent as the horror aspect. Although the issue of sexual exploitation will be examined in depth in the next chapter, it is worth mentioning here one of the most representative examples of the “horror-sexploitation” current: Al Adamson's *Nurse Sherri* (US, 1978). When her shapely body becomes possessed by the soul of a professor of the occult who died during surgery, nurse Sherri Martin (Jill Jacobson) starts killing members of the hospital staff and people outside her workplace. Her colleagues, including her boyfriend/doctor Peter Desmond (Geoffrey Land), attempt to save her, and eventually succeed. An emblematic product of “horror-sexploitation”, Sherri combines an undeniable sense of monstrosity with sexual explicitness. These elements are visually conveyed through the continued showcasing of Sherri's voluptuous shape – which provocative clothes enhance – despite the “monstrous” decline that progressively contaminates her body surface.

Besides horror films like *Nurse Sherri*, the period also witnessed the production of more traditional horror films, with nurses portrayed as either victims or agents of crimes. Examples include Sergei Goncharoff's *House of Terror* (US, 1973), Alan Beattie's *Delusion* (US, 1980), Jim Wynorski's *Not of*

this Earth (US, 1988) and Brett Leonard's *The Dead Pit* (US, 1989).

Interestingly, although nurses do not figure prominently in 1990s horror cinema, in the 21st century at least five horror films feature nurses in main roles. Amongst these is Takashi Shimizu's *The Grudge* (US, 2004), whose nurse-protagonist Karen Davis, played by Sarah Michelle Gellar – an icon of the horror/vampire genre since the 1990s³ – is one of the few “good” action nurses appearing in my corpus of horror films. Karen fights against the curse, risking her own life and eventually surviving. She also complies with a nursing exercise: being assigned to an old lady suffering from dementia, Karen is shown washing the patient’s body, and helping the latter lie down in bed. She bends over and embraces the sick woman, adhering to the traditional nurse/angel configuration. Karen’s jumper is distinctly white – the colour of purity and goodness (Dyer 1997), as well as of the classic nursing uniform. Karen’s depiction thereby supports one of my core arguments: from the late 1990s up to now, the representation of screen nurses has registered a return to more reassuring and professional images, recalling those most commonly displayed in film from the silent era to the 1950s. This point will recur in chapter four.

If the notion of corruption – in terms of physical, but also spiritual alteration – is considered part of the complex, multi-faceted concept of exploitation, the horror nurses examined in this section, diverse embodiments of the idea of monstrosity, represent the most exploited female types explored within the varied “thrilleresque” repertoire examined in this chapter, and so far in this study, too. As

³ Besides playing “Buffy” in the famous TV series *Buffy The Vampire Slayer*, Sarah Michelle Gellar has starred horror films like *I Know What You Did Last Night* (US, 1997) and *Scream 2* (US, 1997).

paradigmatic of the genre, horror nurses are also cinematic expressions of the particular nursing context that gave birth to them. American nursing has been discussed already in this chapter and, more extensively, in chapter two – which also details Italian nursing. The latter, we saw, was not subject to significant reform from 1940 to 1974 – a period that witnessed, on the other hand, the advent of Vatican-supported DC as Italy’s leading party. To some extent, the ambiguity underlying Bava’s nurse Helen – a not entirely malevolent mother – can be seen as emblematic of the film’s context: a conservative Italy, which did not see nursing as one of its priorities. On the one hand, as discussed above, as her depiction precedes the advent of Italian feminism, Helen is not as “transgressive” as the canonical “malevolent mother”. On the other, Helen’s embodiment of nursing ideals is tainted: she is also a thief, which may be said to reflect Italy’s low consideration of the profession at the time.

That said, this chapter has highlighted that, national backgrounds aside, hybridity is a trait most nurses share, in all types of thriller-esque films. I claim that nurses’ hybrid nature mainly depends on their professional identity: nursing is what enables them to distinguish themselves – usually, in a way that promotes traditional motherly features (caring and self-sacrifice) even though, in these films, they embody female types familiar from the horror genre and that are on the surface far removed from them, that is evil/monstrous individuals. The crime genre’s influence on the nurse’s portrayal thereby inflects her image ambiguously, mixing contrasting features that eventually create dramatic tension. Further evidence of nurses’ hybrid depictions will be offered in the following chapter, dealing with their representation in comedy.

CHAPTER FOUR: Nurses in Comedies

My study of the representation of nurses in feature film ends with an account of their presence in comedy. This genre is one of the most prolific in terms of the nurses: my corpus comprises around 70 comedies – including sexual comedies – which feature nurses as either the protagonist or in a major role. Comedy is thus second only to melodrama in terms of films featuring nurses. Beatrice and Philip Kalisch (1982, 1983, 1987; *see also*: Kalisch, Kalisch & McHugh 1982), Julia Hallam (2000) and David Stanley (2008) have already devoted significant attention to the presence of nurses within the genre. My research will build on their work, exploring the range of images in comedy, and questioning the common thesis that sees comic nurses exclusively in terms of their objectification.

Besides expanding on the significance of sex-kittens and battleaxes, I shall examine two new categories of comic nurses: the “funny nurse”, found in romantic comedy, and the “carnavalesque nurse”, a more grotesque figure, resulting from male-to-female cross-dressing in comedian comedies. I will also focus on Italian popular cinema, a context so far largely neglected despite its significant contribution to comedies, especially “sexual” ones. My analysis of comic portrayals of nurses will also expand the debate on exploitation – “the genre of laughter”, drawing on Kathleen Rowe (1995) who argues that, *par excellence*, comedy relies heavily on exaggeration, ridicule and trivialisation. This affects how we understand the representation of women, which is rich ground for stereotypes, including evidently for nurses.

Comedy dates back to the early years of cinema: scholars including Frank

Krutnik (1995) have traced its origins to the “gag-based slapstick comedy” period, whereas Tom Gunning (1995) argues that comedy is as old as film itself, specifically referring to one of Lumière’s earliest shorts: *L’arroseur arrosé/Tables Turned on the Gardener* (FR, 1895). Despite its early genesis, significant scholarly examination of comedy only really began between the late 1980s and the 1990s, with books by Jerry Palmer (1987), Ed Sikov (1989), Steve Neale and Frank Krutnik (1990), Andrew S. Horton (1991), Wes D. Gehring (1994), Kristine Brunovska Karnick and Henry Jenkins (1995), and Rowe (1995). Comedy’s multifaceted nature, encompassing a variety of forms and generic influences, is a likely reason for this: the difficulty in defining the genre was indeed a major scholarly concern.

In terms of the feminist film criticism of comedy, Rowe undeniably is a key reference. In *The Unruly Woman* (1995), she argues that feminist scholars did not truly engage with comedy until the 1990s. There are, however, some exceptions: Gillian Swanson (1994), for example, makes reference to Patricia Mellencamp’s 1986 “Situation Comedy, Feminism and Freud: Discourses of Grace and Lucy”. As Swanson argues, “feminist analysis has focused on the use of sexual stereotypes which place women as objects of comedy [...] according to norms of sexual desirability”: the traditional comic types of “the dumb blonde” theorised by Richard Dyer (1979a), “the irresistible sex-bomb”, and “the aged shrew” are examples. Swanson (1994) also remarks that, from a psychoanalytical and gender-oriented angle, such stereotypical images can be read as visual metaphors of men’s fantasies or anxieties (p. 94). In 1995, Rowe questioned these views, asking how can women be also the “subject of a laughter [...] using in disruptive,

challenging ways the spectacle already invested in them as objects of a masculine gaze” (p. 5). Rowe's argument is of particular interest, being often applicable to the representation of nurses in comedy, as we will see.

Comedies about nurses – as with melodramas and biopics – originate in the silent era, with films from the early 20th century like *Wanted: A Nurse* (US, 1906), *Billy's Nurse* (US, 1912), Allen Curtis's *Good Morning Nurse* (US, 1917) and Alfred J. Goulding's *Kick The Germ Out of Germany* (US, 1918). The 1920s, 1930s and 1940s also showed examples, including Fred C. Newmeyer's *Why Worry?* (US, 1923), James Cruze's *Leap Year* (US, 1924), Walter Lang's romantic comedy *Wife, Doctor and Nurse* (US, 1937), and Jules White's *General Nuisance* (US, 1941). A 1950s film worth mentioning is Richard Sale's *Half Angel* (US, 1951), a romantic comedy featuring Loretta Young as nurse Nora Gilpin. Young, as outlined in chapter two, had previously played the nurse in Irving Cummings's recruitment melodrama *The White Parade* (US, 1934).

The boom in comedies featuring nurses, however, occurred between the mid-1950s and the 1970s. The latter decade also inaugurated a significant trend in sexual comedies, which were numerous until the late 1980s. From 1954 to 1970, Britain saw the release of Ralph Thomas's seven *Doctor* films, of which four featured nurses in main roles: *Doctor in The House* (1954), *Doctor at Large* (1957), *Doctor in Love* (1960) and *Doctor in Clover* (1966). In 1958, an even more important British comic series began. Following the success of *Carry On Sergeant* (1958), Gerald Thomas – Ralph's brother – directed his second *Carry On* film: *Carry On Nurse* (1959), the first production of the British series specifically about nurses. Between 1962 and 1972, five other important comedies were

released. The first two, *Twice round the Daffodils* (1962) and *Nurse on Wheels* (1963), starred Juliet Mills as nurse Catty and nurse Joanna Jones, respectively. Mills later played a nurse in Richard Attenborough's musical *Oh! What a Lovely War* (UK, 1969). Then, three *Carry On* comedies followed: *Carry On Doctor* (1968), *Carry On Again, Doctor* (1969) and *Carry On Matron* (1972). The latter expressly focused on nursing, with Hattie Jacques as the matron – one of the archetypal British screen incarnations of the battleaxe. *Carry On* films aside, nursing was also a focus in Jack Gold's *The National Health* (UK, 1973).

Among the Italian comedies of the period, I would highlight the last episode (of three) of Marino Girolami's *Veneri al sole/Venus in the Sun* (1965), entitled "Come conquistare le donne" ("How to Conquer Women"). A shy young man, Raimondo Raimondi (Raimondo Vianello) – whose Don Juan father initiates him into the "art" of seducing women – ends up in hospital and falls in love with nurse Silvana – played by Annie Gorassini, a beauty icon of 1960s Italian cinema, and here the epitome of the nurse as object of male desire. Italy's contribution to the comedies about nurses is, however, especially notable in relation to sexual – or rather, sexy – comedies, a sub-genre that was prolific from the mid-1970s.

As far as 1960s-1970s American comedies about nurses are concerned, two films are noteworthy as emblematic: Norman Panama's *Not With My Wife, You Don't!* (1966), and Rod Amateau's *Where Does It Hurt?* (1972). In the first, Virna Lisi – seen as "Italy's answer" to Marilyn Monroe and Brigitte Bardot (Fallaci 2010) – plays Italian ex-army nurse Julietta Perodi – an example of the "post-war dumb blonde" Dyer (1979a) and Rowe (1995: 171) describe – whose love Tom Ferris (Tony Curtis) and Tank Martin (George C. Scott), two military pilots and

friends, seek. Nurse La Marr (Eve Bruce) in *Where Does It Hurt?* embodies a similar type, aligned with another, highly stereotypical and vulgar nurse: the battleaxe, unfriendly and unethical head nurse Throttle (Hope Summers).

Though comedies depicting nurses continued to be released, their production diminished after the 1980s. My corpus – which includes twenty comedies from 1959 to 1979, and fifteen from 1980 to 2011 – reflects this. Counterbalancing this downward trend in “straight comedies” was, however, the advent of sexual comedies in American, British and Italian cinema from the early 1970s for almost two decades – a trend Stanley (2008: 90) also foregrounds.

Examples of sexual comedy include, in America, Robert Altman's *M*A*S*H** (1970), Russ Meyer's *Cherry, Harry and Raquel* (1972), Gerard Damiano's *Meatball* (1973) – Damiano being especially famous for *Deep Throat* (1972) – and Chuck Vincent's *Young Nurses in Love* (1989); in Britain, Derek Ford's *What's Up Nurse?* (1977), and Justin Cartwright's *Rosie Dixon, Night Nurse* (1978); in Italy, Nello Rossati's *L'infermiera/The Sensuous Nurse* (1975), Mario Bianchi's *L'infermiera di mio padre/My Father's Nurse* (1976), Mariano Laurenti's *L'infermiera di notte/Night Nurse* (1979) and *L'infermiera nella corsia dei militari/The Nurse in the Military Madhouse* (1979), and Nando Cicero's *W la foca* (“Long live the seal”, 1982).

Based on a sample of around ten American, British and Italian sexual comedies, it is clear that the American repertoire is more explicitly sex-oriented – and, in some cases, verges on the pornographic – than the British and, especially, the Italian cases. Peter Bondanella (2009), indeed, chooses to define Italy's trend as “sexy” rather than “sexual” comedy (p. 211). Yet, unlike America and Britain,

Italy's production of sexy comedies is much higher than that of "traditional" ones, thereby offering a controversial as much as complex case study.

By virtue of their paramount importance within the British comic canon, and of the variety of nurses' portrayals offered, Gerald Thomas's comedies will open my account of comedy, with *Nurse on Wheels*, *Carry On Nurse*, *Carry On Doctor* and *Carry On Matron*. Subsequently, I will concentrate on Italian sexual comedies, of which Mariano Laurenti's *L'infermiera di notte* is emblematic. References to the American comic repertoire shall be made as my arguments progress, with Altman's *M*A*S*H** (1970) a main point of interest. In this respect, it is noteworthy that, although national identity marks my case studies through elements I shall progressively highlight, the comic nurses' representation ultimately responds to general trends, going beyond the particular national cinema.

4.1 British romantic and comedian comedies: Gerald Thomas's "nurse-fest"

Director Gerald Thomas and producer Peter Rogers are undeniably central to the history of British comedy. Richard Webber (2008) argues that Thomas and Rogers's "partnership [...] begot the most successful series of British comedies ever" (p. 11) – referring to the *Carry On* series, launched in 1958. Post-war Britain also saw several remarkable comedies by Ealing Studios, "one of British cinema's most powerful brands", Mark Duguid (Ealing Comedy) stresses. This important cycle of Ealing comedies, however, only lasted from 1947 to 1955, thereby including a relatively small number of films, equivalent to around 1/3 of

the whole *Carry On* series, which numbered 31 productions from 1958 to 1992. It should come as no surprise, then, that Duguid himself defines the *Carry On* films as the Ealing Comedies' "serious rivals" within the genre.

When *Carry On Sergeant* came out in 1958, Thomas and Rogers could not have known how productive their partnership would be. As Webber (2008) stresses, not only was it "circumstance that led to the series", but Thomas and Rogers's "seemingly never-ending journey" went beyond the *Carry On* experience, to also include the nursing-related *Twice round the Daffodils* and *Nurse on Wheels* – among other films, television productions and stage adaptations (p. 11). *Carry On Nurse* (1959) was Britain's box-office hit of the year and, until *Four Weddings and a Funeral*'s release in 1994, also the main box-office success of British comedy in the States and Canada (p. 50). Despite this, the film – as often happens with domestic comedy – received a largely dismissive critical response, as some reviews published upon its release testify.

The Monthly Film Bulletin depicted *Carry On Nurse* as a "stale" comedy "mixing slapstick, caricature and crudely anatomical humour" (1959, 45): this was to be emblematic of the type of criticism the whole *Carry On* series would receive – all low-budget films, with fairly simple plots and mainly aimed at making fun of (exaggerated) individual types or professional categories. Though not material for "complete eggheads" (*Variety* 1959), Webber (2008) argues that *Carry On* films within Britain have a cult status, "as much [...] as fish and chips" (p. 5).

The sense of "Britishness" emerging from these films – especially from their characters and settings – was certainly influential. *The Hollywood Reporter*'s (1959, 3) review of *Carry On Nurse* is indicative: "most of it is local in nature,

and the sectional speech will be a handicap for American audiences”. Webber (2008), who also is one of the “Brits” who grew up with the series, argues that, with respect to the British humour’s history, *Carry On* films not only continued Britain’s comic tradition of stage performers like Max Miller¹, but also inspired the comedians who would later appear in comic magazines like *Viz*². In his opinion, this combination of past and present British humour has been key to the *Carry On* films’ everlasting success in the country (p. 6).

A key point is the issue of class. Julia Hallam (2000) argues that “within the ‘Carry On’ format [...] for the first time, working-class nurses were depicted on the screen [...] as busty sex objects [...] or as authoritarian targets of derision [...] but they were not passive” (p. 57). This quote anticipates various elements that my analysis of *Carry On* nurses will consider and build on. Here, however, I would solely focus on the *Carry On* films’ distinctive class-based critique, which Hallam sees as inscribed, too, into Britain’s comic tradition of music halls, “where the working man mocks those who seek to order and control his life” (p. 57). Indeed, while mocking the British working class’s mores, the *Carry On* comedies also make fun of middle-class moralism and self-control. Thus, middle-class characters are depicted as prudes and even prone to impotence, as opposed to their sexually uninhibited and worldly-wise working-class counterparts. In terms of female nurses, this class-based dichotomy is often reflected in the matron/nurse pair.

As we saw earlier, the nurse’s hegemonic image as white and middle-class

¹ Max Miller is Thomas Henry Sargent’s (1894-1963) stage name. He is a British comedian, especially popular from the 1930s to the 1950s.

² *Viz* is a cult – bawdy, hip and risqué – British comic magazine, running from 1979.

finds its origin in 19th century colonial Britain, when this race/class configuration was seen as a means to “respectability”: “respectable” were “the moral, the worthy, the English, the White and the non-working-class” (Skeggs 1997: 3). In this light, the British *Carry On* films’ pungent characterisations of, respectively, middle- and working-class nurses – which clearly contain a critique of Britain’s class-based dichotomy – becomes more intelligible. In generic terms, working-class characters function as both the butt and perpetrators of humour against the middle-class’s questionably respectable mores. On the level of the representation of affect, however, the contrasting characterisations of “uninhibited” working-class and “proper” middle-class nurses ultimately lead to their identification as, respectively, “unprofessional” and “professional”. Below I explore these fascinating contradictions, drawing on textual analysis as well as on the work of Skeggs (1997), Dyer (1997) and Hallam (1998, 2000).

Generically, *Carry On* films may be seen as examples of what Steve Seidman (1981) defines as “comedian comedy”. In this comedy category, comic performers are the true spectacle, their performance taking precedence on narrative development. From a gender perspective, Rowe (1995) argues that this comedy type can be defined as “male-centered comedy” (p. 104). She stresses: although “women have performed in comedian comedy since its earliest day [...] until recently, their absence from the canon of comedian comedy, as well as the cultural and institutional reasons for that absence, have remained largely unexamined” (Rowe 1995a: 45).

Carry On comedies offer an interesting departure from the strict gender bias noted in Rowe’s account. Though most of these comedies’ traditional cast is

actually composed of men – Kenneth Williams, Sid James, and Charles Hawtrey, to mention the most central – female comedians like Hattie Jacques, Joan Sims and Barbara Windsor are equally emblematic of the series: their names feature in all the *Carry On* films’ accounts I have scrutinised. While some parts played by these actresses fall within grotesque or slapstick types, i.e. the battleaxe, others belong to the romantic types Rowe theorises.

Examples of the romantic type include Shirley Eaton’s nurse Dorothy Denton in *Carry On Nurse* – the glamorous British actress also playing nurse Nan McPherson in Ralph Thomas’s 1957 *Doctor at Large* – and Barbara Windsor’s nurse Susan Ball in *Carry On Matron* – Windsor also interpreting nurse Sandra May in *Carry On Doctor* (1968). As I detail below, Dorothy and Susan epitomise different female types, which their respective social classes significantly inflect – Dorothy (Eaton) being overall self-controlled and, judging from her standard English accent, middle-class, as opposed to the “saucier” working-class and cockney speaking Susan (Windsor). However, romance marks both their narrative trajectories: this enables us to identify them as romantic heroines despite the fact that they star in comedian comedies – productions mainly concerned “with the foibles of the current society and the obstacles to its transformation”, rather than with “a utopian future community” (Rowe 1995: 105), a key feature of romantic comedy.

Rowe’s 1995 ground-breaking work explores women’s role in comedy through the figure of the “unruly woman”, related to Bakhtin’s notion of the carnivalesque. Notwithstanding their diverse types of “unruliness”, what distinguishes unruly women on screen is the use of spectacle as a means to power.

This significantly affects their position in relation to men – a particularly relevant feature of romantic comedy compared to the traditional, subservient roles of melodramatic women. By contrast, comic women “turn the tables on the men” and:

Both initiate the joke and complete it with their laughter
[...] The men [...] become the objects of a gaze that
reduces them to fools, victims of a laughter they cannot
comprehend. [...] The women redefine the terms of the
spectacle they represent [...] actively [...] through their
laughter as spectacle-for-themselves [...] By turning their
gaze onto the men, they make them, the law, and
patriarchy itself the objects of their derisive laughter (p.
17).

Diverse types of unruliness in cinema history substantiate Rowe's explanation, including “Twentieth Century Sex Goddess” (West 1959) Mae West's Lady Lou in *She Done Him Wrong* (US, 1933), and Claudette Colbert's “unruly virgin” Ellie in *It Happened One Night* (US, 1934). To some extent, *Carry On* sex-kitten nurses – who are always depicted as working-class – evoke West's “uninhibited bombshell” Lou. Like Lou, the sex-kitten nurse also tends to “elude male control by controlling men herself [...] by creating and manipulating herself as spectacle”, and this “doesn't make her vulnerable to men, but ensures her power over them” (Rowe 1995: 120). Likewise, Colbert's virginal Ellie clearly

is a precursor of Joanna Jones in the romantic comedy *Nurse on Wheels* – the “funny nurse” examined in my first case study, the epitomise of the middle-class nurse, as her English accent (contrasting with the cockney speech of some of her patients) suggests. Unlike Lou, Ellie and Joanna do not found their unruliness on the notion of sexual experience, but on the concept of virginity, their narrative trajectories aiming to foster the couple’s formation, a goal worth any type of effort. As Rowe (1995) stresses: “In *It Happened One Night* and the romantic comedies that followed, the familiar union of man and woman [...] bridges the gap between social class [and] between the sexes [...]. With these virtues, a person can achieve perfect happiness” (p. 126).

Rowe discusses female unruliness also through the “parodic excesses” underlying the idea of the “grotesque” (p. 11). She draws on Mary Russo’s (1986) view that the female grotesque is often expressed through bodies that “destabilize the idealizations of female beauty or [...] realign the mechanism of desire” (p. 221). The *Carry On* comedies’ matron-battleaxes and “carnavalesque nurses” are examples of the above. Their understanding cannot be set aside from gender. Drawing on Rowe’s (1995) account of Freud’s study of jokes, from a male perspective matriarchal figures like the battleaxe are “fearful or silly symbols of repression and obstacles to social transformation”: they take the place that, traditionally, the father figure occupies, standing between the hero and his desire. Hence, “they serve as targets for the hatred of repression mobilized by comedy, especially by the infantile, regressive, and misogynistic hero of the comedian comedy” (p. 105).

All Jacques’s matrons – in *Carry On Nurse*, *Doctor*, *Again Doctor* and

Matron – embody, to a greater or lesser extent, the features Rowe foregrounds: authoritative, overweight, and older, they epitomise the idea of excess and, often, sexual frustration. This characterisation – which, within the British comedy tradition, is influenced by the matron’s middle-class status – contrasts strongly with the much younger, mainly working-class and (sexually) appealing nurses who are under the authority of these matrons, and in the leadership the latter exert over both male patients and doctors, regardless of the hospital’s traditionally hierarchical (and patriarchal) system.

These male characters’ attitude towards the matron is likely to find in her overweight body a further explanation. According to Rowe (1995), round bodily shapes are reminiscent of maternity, encompassing the idea of ageing. This makes female characters like the matron-battleaxe the recipients of male worries, as they harbour “a masculinist culture’s projected fears of ageing and death” (p. 63). Additionally, class, too, plays a role in depicting male fears. Kenneth Williams’s characters are emblematic in this respect: usually paranoid and sexually impotent physicians, they reflect British comedy’s traditional representation of middle-class men.

Drawing on Rowe (1995: 31-4), the “carnavalesque” nurse – the second female grotesque figure *Carry On Nurse*, *Doctor* and *Matron* display – is a typical example of gender inversion, in the form of cross-dressing. Here, the masquerade is of a male-to-female type, men dressing up as female nurses. Jackie Stacey (1994a) stresses that, depending on the disguised subject’s gender, the cross-dressing value varies: women dressed up as men still appear sensual and appealing, whereas men dressed up as women are usually subject to ridicule and

derision.

Carry On Nurse's, *Doctor's* and *Matron's* carnivalesque nurses fit this scenario: their sexual disguise is mainly laughable. However, their experience in some ways illustrates gender inequality. In *Carry On Matron*, nurse Cyrille – Cyril Carter (Kenneth Cope) in disguise – becomes the target of Doctor Prodd's (Terry Scott) courtship, thereby experiencing, albeit in comic form, the sexual harassment that commonly affects women.

In what follows, I will explore further these different types of comic nurses. My first case study focuses on romantic comedy, and examines Juliet Mills's Joanna Jones in 1963 *Nurse on Wheels*, the nursing version of the “unruly virgin”, which I define as the “funny nurse”. A film so far largely neglected by critics, *Nurse on Wheels* expands my present account of the nurse's portrayals, and adds to the repertoire of screen comic nurses scholars have explored to date. *Nurse on Wheels'* examination also contributes to research on British stardom, “miraculous actress” Mills – as director Billy Wilder once defined her (quoted in Phillips 2010: 317) – forming part of Britain's panorama of film stars.

4.1.1. Romantic comedy and Juliet Mills's “funny nurse” in Nurse on Wheels (UK, 1963)

The romantic comedy *Nurse on Wheels* was Thomas's third nursing-centred picture. Juliet Mills plays protagonist Joanna Jones, the new district nurse of Blandley, a fictional village in the English countryside. The role had initially been assigned to Joan Sims, one of the *Carry On* films' stars – who also played nurse Stella Dawson in *Carry On Nurse* and, previously, nurse “Rigor Mortis” in

Doctor in the House. Upset by the recasting, though still playing a part in the film, Sims (2000) wrote: “the blunt fact was that I was simply too round to play the glamorous female lead”, explaining that “the trim figure of Nurse Stella Dawson”, which she had interpreted five years earlier, “had been somewhat swamped by [...] too many buns and gin and tonic” (p. 101).

Mills, who had also played nurse Catty in *Twice round the Daffodils* one year before, was undoubtedly more suited than Sims for the role of “unruly virgin” nurse Joanna. Mills epitomised the British version of a female type highly in vogue at the time, and whose most famous emblem was Doris Day, the “All-American Girl Next-Door, the Perpetual Virgin, and Miss Goody Twoshoes” (Braun 2010). According to Rowe (1995), “sunny and sexless” Day was the actress who “typified the new heroine of romantic comedy” from the late 1950s (p. 172), thereby plausibly becoming a model for Mills, too. Besides resembling the Hollywood star – with her light-coloured hair and delicate facial features, Day's and Mills's career trajectories were also similar: both became famous thanks to film comedy, then moved on to television as sit-com characters.

My interest here is examining Mills's performance as a heroine of romantic comedy, and investigating how being a nurse affects her characterisation as an “unruly virgin”, thereby rendering her a “funny nurse”. The film's hybrid character is relevant here: as well as being a romantic comedy, *Nurse on Wheels* also includes passages of “pure comedy” with Joanna the centre of the spectacle.

Initial clues about Joanna's character are in the film's title – *Nurse on Wheels* – highlighting both Joanna's professional identity and a key element of her spectacle, “the wheels”, that images, too, convey from the opening credits.

Adapted from Joanna Jones's 1961 autobiographical novel *Nurse is a Neighbour*, the film starts with Joanna adroitly riding her bicycle, the only vehicle – we learn shortly afterwards – she can actually drive. Joanna is not going to work but to her driving test: having applied for the district nurse's position, a driving licence is indispensable. Up to this moment, however, Joanna's comic nature is not obvious: she shows gracious movements and a calm expression while, in her nursing outfit and accompanied by cheerful music, she rides her bicycle. In fact, Joanna initially appears an ordinary, “respectable” nurse (figure 4.1), an identity clearly connected to her being white, blonde and middle-class.



Figure 4.1



Figure 4.2

The film's first scene modifies the above impression, establishing the production's comic tenor, of which Joanna is the most representative character: light humour without vulgarity, though occasionally marked by slapstick. An example of pure comedy, the scene starts with Joanna taking her last driving lesson before the examination. Joanna's driving teacher, Mr Top, immediately offers a clue about her burlesque side, as he earnestly states: “I shall miss you Miss Jones... 106 lessons!”.

Top's comment introduces an escalation of fun, with Joanna the subject of a humour revolving around her profession. The second scene, showing the practical driving test, is emblematic in this respect. When the lesson ends, Top gives Joanna the candid advice: "look on your examiner as a friend [...] imagine you are just giving him a lift!". A dissolve introduces the examiner's figure. Following Top's suggestion to the letter, Joanna's approach to the examiner proves troublesome: he does not appreciate her excessive friendliness. Joanna's behaviour here also identifies her with the classic "dumb blonde" comic type that Richard Dyer's pioneering "The Dumb Blond Stereotype" (1979a) analyses. However, successfully dominating all the male characters in the film – as I will show – Joanna undermines the basis of this stereotypical image: though blonde, she is not dumb.

Joanna and the examiner's opening dialogue expresses discomfort, and so do their stiff postures and expressions – of concern, in Joanna's case, and disquiet, in the examiner's (figure 4.2). Uneasiness deteriorates when Joanna inadvertently hurts the man while driving, and pushes his pipe deep inside his mouth, causing him to almost choke. This burlesque situation, which Joanna's inattention provokes (in a typical "dumb blonde" way), might imply her punishment, particularly as her "victim" is the scene's authority figure. By contrast, this mishap determines Joanna's empowerment as an "unruly woman": her way of managing the accident leads to the subversion of established social hierarchies, and of traditional (patriarchal) gender roles. Joanna's nursing skills crucially intervene: she can save the examiner's life and, taking advantage of her "heroic" action, get her driving licence – despite her questionable driving performance.

Joanna's nursing identity is what enables her to assume this leading position: even though the scene remains basically comic, her professional status, thus, overrides her dumb blonde persona.

Following the incident, a close-up reveals Joanna's authority (figure 4.3). Unlike the examiner – of whom the spectator only sees a partial profile – she is the focus of the shot. Against expectations, she does not appear to be in trouble: as a nurse, she is in fact much more at ease than during the driving session. Her tense facial features mirror her authoritative manners; her position in the frame and dialogue also convey a sense of leadership: she dominates the examiner, ordering him not to move, a directive to which he acquiesces.



Figure 4.3



Figure 4.4

The scene's comic nature reaches its peak when Joanna, having completed the operation, starts behaving as if she were really treating a patient. Here, humour results from the overturning of reality, a core feature of comedy, which Joanna enacts by turning her driving examination into a sort of practical first aid session. A key visual sign is her changed, amused expression – which, as we saw, was fairly serious when she started the procedure (figure 4.4).



Figure 4.5

The end of the scene marks Joanna's definitive empowerment over the examiner. A medium close-up (figure 4.5) frames the two looking at each other, with Joanna acting as the new authority. Pointing her finger at the man, she starts giving him pretend medical instructions. Beginning with “don't you talk, you must rest your voice!”, she finally asserts: “but if you're very good, I'll allow you to whisper: 'nurse Jones, you passed your test!'”. The scene ends with Joanna winking at the examiner: she is given her driving licence and – we shall learn – she has also been appointed the district nurse post in Blandley.

Nursing is a core ingredient of Joanna's comic nature. Yet, since her characterisation as a “funny nurse” finds its matrix in the unruly virgin figure, romance is also crucial. Love becomes integral to the plot with Joanna's arrival in Blandley, where she meets farmer Henry Edwards (Ronald Lewis), her lover-to-be. Joanna's association with the “unruly virgin” type also involves strength. Her approach to male characters – including Henry and her patients – reflects this, and so does Joanna's identification as a sort of “motherless character” – another distinctive trait, according to Rowe, of the romantic comedy heroine.

Drawing on Stanley Cavell (1987) and Lucy Fischer (1991), Rowe (1995) identifies maternal lack amongst the elements distinguishing the romantic comedy heroine from the melodramatic one: romantic comedy manages “to eliminate the maternal in the symbolic matricide [...] for if romantic comedy maims the father, it kills the mother. [...] Mothers and mother-substitutes exist in many romantic comedies, but [...] rarely hold any power to transfer” (p. 11). The scenario Rowe describes fits Joanna’s relationship with her mother: though deeply affectionate towards her daughter, Mrs Jones is an aged and unreliable woman who depends on Joanna's continuous supervision, and is unable to transfer any power to the latter. This subversion of traditional mother/daughter roles – with Joanna the donor rather than the beneficiary of maternal care – is, yet, not very recurrent in romantic comedy: more commonly, Rowe stresses, the romantic comedy heroine “neither has nor is a mother, and the father fills the critical parental role” (p. 11). From this angle, Joanna is a special romantic comedy heroine, since she lacks a paternal figure.

Joanna's nursing identity is a central element in her characterisation: caring is key to her spectacle as an “unruly woman”, and is also foundational of her “unruly virginity”. The “funny nurse” image, which I have designed to define Joanna, combines all these particular elements. In what follows, I shall illustrate how Joanna's unruly virginity as a funny nurse is constructed.

The connection between comedy, profession and romance, which defines the funny nurse figure, is first displayed during Joanna's encounter with Henry. Driving his car, Henry almost runs over Joanna, on her bicycle, which provides the pretext for them to collide in person. The scene combines the three

constitutive elements of the funny nurse figure as follows: comedy is mainly ascribed to the symbolic sphere, profession to narrative and dialogue, whereas the characters' performance evokes love.

In generic terms, the wheels' symbolism is intrinsic to Joanna's unruly spectacle. Here, this symbol supplies an otherwise simply romantic scene with humour and, in so doing, also further strengthens Joanna's association with the dumb blonde type. From a narrative angle, nursing acts as a bridge between the two future partners' acquaintance, Joanna moving to the village for professional reasons. Contextually, dialogue describes nursing as an integral part of Joanna's identity, since she introduces herself to Henry as: "Joanna, I nurse".

The fact that Henry presents himself in the same way – "Henry, I farm" – calls attention to a further, typical element of romantic comedy: the two characters' different social statuses, with Joanna a working woman, and Henry the owner of extended farmlands. This difference eventually leads the lovers to temporarily split up: Henry comes to embody the rich, avaricious man, while Joanna maintains her distinctive, altruistic nature – a characteristic trait of nursing, and also a means to her greater wisdom, hence power. It is indeed Joanna who decides to leave Henry, and later accepts to be reunited with him – welcoming his marriage proposal, too – only upon his admission of fault.

One may plausibly argue that the presence of romance in Joanna's narrative trajectory confers on her overall powerful and male-dominating profile more conservative and stereotypical tones. Her characterisation however only imperfectly fits that of the romantic screen nurse, as seen so far. At the beginning of the film, Joanna is not in a relationship with a male doctor or patient.

Moreover, as we saw above, nursing competency empowers her. On the other hand, she eventually falls for the socially superior Henry, which reinstates a traditional pattern of male domination.

This latter point draws attention back to the contrast between social classes and sexes, which Rowe (1995) sees as an integral part of romantic comedy's narrative structure, since their final reconciliation also highlights their “illusory” nature. Hence, love – here the familiar union of a heterosexual couple – is what eventually triumphs (pp. 125-6). This applies to Joanna and Henry, whose romance begins on their first encounter. Following the crash, tension dominates, only disappearing when Henry notices Joanna (figure 4.6). Romantic music begins. Close-ups and shot-reverse-shots enhance the two characters' changed mood and mutual attraction. Henry looks tenderly at Joanna, with his lips slightly open in admiration (figure 4.7). Joanna reciprocates Henry's gaze, and betrays a timid smile (figure 4.8) – this unusually shy behaviour suggesting romance. Dialogue is also significant: both lovers-to-be attempt to take responsibility for the accident, therefore freeing the other from blame. This deferential attitude and their reciprocal behaviours also suggest their mutual attraction, especially if one considers that authority and other people's respect tend to distinguish both characters' – and Joanna's, especially – approach to the village community.



Figure 4.6



Figure 4.7

The scenes depicting Joanna's relationship with her patients clearly show this. Her firm and detached manners (with men, especially) mirror her “proper” professional conduct. Meanwhile, the contrast with the patients’ impulsiveness also generates humour. Most Blandley people are initially sceptical about Joanna's value as a nurse, considering her too young to be as good as her elder predecessor, Merrick (Barbara Everest). In a typical misogynist move, this prejudice especially affects women, presented as mostly aged and awkward characters. Ultimately, Joanna appears as the only, truly positive woman in the film – which signals the importance of nursing to her characterisation. She herself acknowledges this, arguing: “nursing? I never wanted to do anything else!”. Yet, her profession’s positive aura is also allied to her young and pretty appearance, conventional good looks being as important to her screen identity as her profession.



Figure 4.8



Figure 4.9

Nevertheless, Joanna's professional authority and skills are a source of strength, clearly mirrored in her serious approach to her impudent male patients. Joanna's visit to George Judd (Norman Rossington), presented as a typical working-class British man, is illustrative. George expects to see Merrick: seeing Joanna, instead, makes him immediately reveal his flirtatious nature, as his demeanour suggests (figure 4.9). As Joanna enters the house, George's flirting turns to provocation – which the contrast with Joanna's kindness and detachment further emphasise. While he wants Joanna to call him "George", she deliberately introduces herself as "nurse Jones" – which George turns into "Jonesie".



Figure 4.10

While George cannot stop himself from approaching Joanna, she tries to keep her distance from him. Pretending to facilitate her task, George unbuttons his trousers. Yet, as he stands up and tries to kiss Joanna, forgetting about his unbuttoned pants, she promptly moves away, while he loses his trousers and falls over. Taking advantage of the incident, Joanna quickly treats George's wound (figure 4.10) and leaves. While supporting comedy, Joanna's decorum also draws on her professionalism, against George's slapstick treatment, turning him into a ridiculous figure. The film proceeds by alternating comic situations centred on Joanna's nursing of awkward patients with the depiction of her romantic ups and downs in the relationship with Henry.

Nursing determines Joanna's distinctiveness: it both generates her comic spectacle and enables her to rise above it and appear dignified. Meanwhile, her depiction as a funny nurse conveys Joanna's embodiment of the traditional unruly virgin type. Joanna's identification with an upright figure challenges critical opinion on the nurse/comedy relationship, which tends to associate nurses exclusively with sex objects or waspish spinsters. Undeniably, cinematic nurses have been depicted more than once as sex-kittens and battleaxes; yet, my research establishes that such images do not dominate these professionals' overall filmic representation. My film corpus reveals that the nurse's predominant representation is the "romantic heroine" in all its generic variants, including the "unruly virgin".

The close relation between nurses and romantic heroines marks other comedies, including *Twice round the Daffodils* (UK, 1962), with Mills and Lewis again playing the romantic couple as nurse Catty and her patient Bob White. Based on the same play as *Carry On Nurse* – Patrick Cargill and Jack Beale's

Ring for Catty – Twice round the Daffodils is set in the tuberculosis ward of Lenton Sanatorium, and tells the story of a group of undisciplined male patients nurse Catty and her colleagues adroitly assist.

Professionalism, love and comedy – the funny nurse's foundational traits – distinguish Mills's character also here. Catty can deal skilfully and also fairly autonomously with her mentally ill patients. In this respect, it is indicative that the film does not feature doctors (although dialogue suggests their presence), and the matron's guidance only appears as peripheral; on the other hand, the matron's presence ensures the film's comic side. The scene where Catty, though on duty, first kisses Bob is indicative: looking for Catty, the matron arrives in the ward and abruptly interrupts this long-awaited romantic moment. Catty, however, approaches her superior as if nothing had happened, then running back to Bob – their passionate kiss being secretly looked at by all Bob's roommates.

That said, Catty certainly appears “less unruly” than Joanna. In this respect, the film's more hybrid generic identity is relevant. Though comedy and romance are *Twice round the Daffodils*' core ingredients, drama is also present. Interestingly, screenwriter Norman Hudis considered the film's “dramatic side” what made it “a sad flop”: though in 1962 “tuberculosis had been conquered [...] people were still dying of it in the UK” (quoted in Webber 2008: 43). Its generic peculiarity and commercial failure aside, this production offers an arguably realistic depiction of nursing – a point Hallam (2000: 61-2) also stresses. Catty's approach to nursing as described above is indicative. That said, the film also portrays nurses as fetishized objects of the gaze. At some point, a nurse loses her skirt and, “unaware” of this, is looked at by a group of hidden male patients – a

configuration clearly recalling classic voyeuristic fantasies.

Nurses as romantic figures, can also be found in the already mentioned *Doctor* series. Based on Richard Gordon's comic novels, these romantic comedies – later adapted for television and radio – focus on the adventures of young male physicians. Depending on the film, either Dirk Bogarde or Leslie Phillips play the doctor. Nurses are inevitably present, with roles of variable importance. As in the *Carry On* films, as we shall see, the earlier the films, the less derogatory the depictions of nurses are. Hence, the *Doctor* series' most representative romantic nurse is Muriel Pavlow's Joy Gibson in 1954 *Doctor in the House*, the serial's first production.

A canonical romantic heroine – thus, not “funny” in the style of Joanna Jones – Joy is a young and dedicated nurse who, in *Doctor in the House*, falls in love with student doctor Sparrow (Bogarde). The two characters' on and off relationship finds a happy ending in the 1957 *Doctor at Large*, the series' third film, when Sparrow tells Joy he means to marry her. *Doctor at Large* also features Shirley Eaton as Nan McPherson, Sparrow's assistant. Nan is a romantic but also sensual nurse. Romance marks her narrative trajectory insofar as she dates Sparrow. However, her sometimes excessive and slightly comic flirting manners – i.e. she does not hesitate to fling her hands round Sparrow's neck when he invites her out – somewhat prevent her from being a classic romantic type. This was not the case with Eaton's nurse Dorothy Denton in the 1959 *Carry On Nurse*, the epitome of the romantic heroine in my section on *Carry On* comedy.

Eaton's Dorothy testifies that “straight” comedies also feature nurses as romantic heroines. The latter, in this generic context, are however juxtaposed to a

series of more clearly stereotypical – sexy and grotesque – nurses. In what follows, I illustrate these types in detail.

4.1.2. Carry On comedies: from romantic heroines to parodic sex-kittens, matron-battleaxes and carnivalesque nurses

The trio of *Carry On* films that prominently involve nurses – *Carry On Nurse* (1959), *Carry On Doctor* (1968), and *Carry On Matron* (1972) – clearly illustrates how the representation of nurses varies, from “romantic” to more broadly comic versions, which are typical of these “comedian comedy” films. In this comedy trio, the nurse’s image as a romantic heroine is aligned with other, equally relevant types, spanning parodic sex-kittens, matron-battleaxes and cross-dressing carnivalesque nurses.

The latter three figures are more concerned with satire and stereotype than the romantic nurse – including its “funny” variant. Hence, in the passage from romantic to comedian comedies, the nurse’s image is subject to an increasing stigmatisation. This implies that, in terms of generic categorisation, comedian comedies are oriented towards the realm of exploitation cinema, these films being a watershed between the romantic comedy’s sexually innocent and professionally competent nurses and their more derogatory and vulgar counterparts in sexual comedies.

While tracing the increasingly sexualised and derisive depiction of nurses in comedian comedies, the examination of the four types I discuss in this section – the romantic heroine, the parodic sex-kitten, the matron-battleaxe and the carnivalesque nurse – will also enable me to verify to what degree such characters

can be considered as misogynist as most critical accounts on the subject have hitherto argued. Emblematic of the existing literature on the topic is the Kalischs' (1982) argument that these decades “witnessed the complete destruction of the once proud and noble film image of the nurse” (p. 610). My analysis questions this argument: while there is undoubtedly a move towards increasingly broad and vulgar depictions, the representation of the comic nurses within the *Carry On* series is more complex than that which has been hitherto argued.

Rowe's argument about the relationship between women and comedy – seeing women as the real subjects of spectacle, often at the expense of male characters – will be a key reference in my discussion. Before proceeding with my analysis, however, an overview of the cinematic and nursing background to the release of *Carry On Nurse*, *Doctor* and *Matron* provides useful insights into understanding the change in the comic nurse's representation. Speaking of the representation of women on screen, Haskell (1987) argues: “from a woman's point of view, the ten years from [...] 1963 to 1973 have been the most disheartening in screen history” (p. 323). For her, directorial misogyny was not the only reason: the women's liberation movement was also influential. The increasing importance of women in society “provoked a backlash in commercial film” (pp. 323-4). Women were depicted as “whores, semi-whores, jilted mistresses, emotional cripples, drunks. Daffy ingenues, Lolitas, kooks, sex-starved spinsters, psychotics. Icebergs, zombies, and ballbreakers” (pp. 327-8). Thus the decline in the nurse's cinematic image therefore seems to comply with a general representational movement. Arguably, it also complies with developments in nurses' social position.

As Robert Dingwall and colleagues (1988: 110-6) stress, between the 1950s and the late 1960s British nursing was subject to significant changes, with the NHS initially investing in the profession – expanding the nursing establishment, and offering competitive wages – before cutting salaries and provoking nurses' discontent and even public demonstrations, among others, the famous “Raise the Roof” action, led by the Royal College of Nursing in 1969. This transitional climate is likely to have impacted on public opinion: from this angle, the different depictions of nurses – “dignified” in *Carry On Nurse*, “tasteless and unrealistic” in *Doctor* and *Matron* (Kalisch & Kalischs 1987: 164-5) – can arguably be seen as comic echoes of Britain's reception of such events. In what follows, I will illustrate how the representational downturn of these, nevertheless, “not passive” (Hallam 2000: 57) nurses is conveyed.

My first focus here is the evolution of the romantic nurse (as displayed in *Carry On Nurse*) into a parodic sex-kitten (found in *Carry On Doctor* and *Matron*), with the latter type incorporating increasing sexual content. We saw that this was a general trend in the 1960s and 1970s representations of women – decades that Linda Ruth Williams (2005) identifies as the “sexploitation” filmmaking era, the first development of the soft-core industry. Notably, however, the medical *Carry On* films centred on traditionally female-oriented subjects – *Nurse* and *Matron* – overall treat nurses less derogatorily than the male-oriented *Carry On Doctor*.

In this regard, a first piece of supporting evidence is found in *Carry On Nurse*'s staff nurse Dorothy Denton (Shirley Eaton). Set at London's “Haven Hospital”, the film features a series of comic situations with nurses and patients as

protagonists. The Kalischs (1987) argue that *Carry On Nurse* is the only health care *Carry On* comedy “in which good taste and wholesome characters are still present” (p. 164): Dorothy is one of them. Considering that Eaton is renowned for her “stunning looks, blonde hair and bosomy figure” (Lisanti & Paul 2002: 118), her characterisation as righteous Dorothy is somewhat unexpected: in comedies, her looks would normally place her in the dumb blonde category.

Yet, Dorothy does not fit this categorisation. She is conscientious, worthy of the consideration of senior nurses, in contrast with other, less experienced colleagues – like Joan Sims's Stella Dawson, the “unruly” character of *Carry On Nurse*. Another key element in this respect – also characterising Joanna Jones in *Nurse on Wheels*, though here even more significant, given that sexual allusion is a leitmotif of the *Carry Ons* (Kalisch & Kalisch 1987: 164) – is Dorothy's serious approach to her flirtatious male patients, in particular journalist Ted York (Terence Longdon). Eventually, Dorothy reciprocates Ted's feelings, despite having initially been secretly interested in a doctor – which inflects her character towards the patriarchal stereotype of the nurse as romantically involved with male doctors/patients. Romance therefore also marks Dorothy's profile, though love here is purely platonic, as she is never portrayed in any explicitly sexual situation.

Dorothy's depiction as “proper” supports Christine Geraghty's (2000) argument: the representation of sexuality in 1950s British cinema mainly relies on the “cliché” of the “beautiful, free and sexy foreign” or “European woman”, drawing on “the well established notion in British culture of the Continent as a place of sexual freedom” (pp. 93-4), in contrast to Britain. Dorothy's supposedly middle-class extraction, as suggested by her standard English accent, further

inflects her depiction as “proper”, and so does her white skin and blond hair. This said, Dorothy is not a classic virgin figure either, in view of Eaton's star persona. Before becoming James Bond's “golden girl” in the 1964 *Goldfinger*, Eaton was mainly known as a “sexy supporting player” (Lisanti & Paul 2002: 118) in British comedies. Her sexy image, obviously key to these roles, is precisely what confers on Dorothy's otherwise decent characterisation a vaguely sensual aura, despite her chaste clothing and proper behaviour.

As a feminine type, nurse Dorothy can thus be defined as a romantic, not unruly but professional, and crucially sexy virgin: an evidently hybrid character, and yet the closest to the idea of a “romantic heroine” offered in medical *Carry On* films.

Dorothy's professionalism, both in terms of expertise and conduct, marks the scene of her first visit to Ted (figure 4.11). She is focused on her work, and clearly dismissive of Ted's gallantry. “I think you are wonderful!”, Ted exclaims, to which Dorothy replies: “Relax, Mr York!”. Dorothy's body language also reflects her detachment: while Ted cannot stop looking at her, she shows him her back, intent on accomplishing her duty. The foreground position she occupies further enhances her serious behaviour, and also her beauty, a key feature of her hybrid persona.



Figure 4.11



Figure 4.12

Although self-control always prevails in Dorothy, her approach to Ted gradually becomes more relaxed. Prior to Ted's discharge, rationality still dominates Dorothy's word: "Mr York [...] let me warn you: hospitals have a strange effect on most men. They [...] think they are in love with their nurses. It happens every week, to every nurse". However, Dorothy's behaviour betrays her verbal detachment: she now openly looks at Ted and smiles (figure 4.12), to the accompaniment of romantic music. This scene evidently marks Dorothy's growing interest in Ted, thereby also reinforcing her visual association as a romantic nurse – so far only suggested by her kind and attentive manners with a doctor, uninterested in her.



Figure 4.13



Figure 4.14

Dorothy's representation as a romantic nurse finds its best expression in her farewell to Ted. The latter is about to leave the ward, while Dorothy is insistently asked by her superior Sister – whose encouraging expression hints that she may be secretly aware of Dorothy's feelings – to give him his final certificate. Though initially reluctant – perhaps due to her convictions about patients' infatuations with nurses – Dorothy cannot refuse. Again, romantic music starts, with a close-up capturing Dorothy's happy expression (figure 4.13). She runs after Ted, calling: “Mr York!”. Ted stops and, once Dorothy has reached him, fixes her in the eyes, replying: “if I have a date tonight, my name is Ted!”. A timid smile on her face (figure 4.14), Dorothy assents, and leaves with him.

Dorothy is an atypical female character within comedian comedy: beautiful but chaste romantic, not a *femme fatale*. Moreover, she is a competent working woman, although her romantic involvement with a patient eventually prevails over professional considerations, a feature found in representations of a range of working women, as we have seen. The secretary, discussed in chapter three, is emblematic, as she is usually about to marry her boss (Galerstein 1989: 331).

As in the case of Joanna Jones, Dorothy's class and racial identity arguably affects the audience's view of her as a nurse: her reassuring professional capability is reinforced by her white, middle-class “respectable” status. Only one other *Carry On* nurse recalls Dorothy's type: Clarke (Anita Harris) in *Carry On Doctor*. However, Clarke is not as attractive – and, coincidentally, a brunette rather than a blonde, unlike many classic *femmes fatales* (Tremper 2006) – and subject to a more pronounced visual exploitation. The famous scene where,

aiming to save her beloved doctor's life, Clarke hangs from a roof and shows her bottom (figure 4.15) is emblematic of her more overtly sexualised treatment.



Figure 4.15



Figure 4.16

Barbara Windsor's nurses, Susan Ball in *Carry On Matron* and Sandra May in *Carry On Doctor*, are further examples of comedy's increasingly bawdy and sexualised treatment of the romantic nurse. These nurses are romantic insofar as love marks their narrative trajectories. Yet, in their representations, the sexual and comic components become clearly more central and explicit. Within this sexualised realm, Windsor's nurses fall within the sex-kitten type. However, within the British comic tradition of the period, sex is ridiculed and thus, to some extent, deprived of its salacious meaning.

Windsor's appearance and star persona are central to this. An acclaimed actress from London's East End – as her cockney accent makes clear – who was made a MBE in 2000 (Windsor 2000), Windsor has become iconic despite not being a classic glamorous beauty like Eaton or Mills. As a result of both her looks and burlesque performance style (which includes her famous giggly laugh), Windsor's distinctive character has always been the “comic caricature of bosomy,

blonde ingenuous femininity” (Porter 1998: 71) – a representation that mirrors British comedy’s class-based humour, traditionally approaching working-class characters as laughably salacious figures (figure 4.16).

Windsor’s feminine types are thereby peculiar to British comedy. Writing on the *Carry On* films, Sarah Street (2009) identifies “stereotyping” and “exaggeration” – “particularly of women” – as two core ingredients of the series’ “successful comic formula” (p. 82). Porter (1998) goes further, arguing: “tarty, giggly blondes like Barbara Windsor formed the paradigm for female comic typecasting” (p. 69). This typically British approach to sexy women’s depiction, mocking mainstream canons of female beauty – on which the traditional notion of sex appeal also relies – is, as we saw, a means to ridiculing sexuality itself, attenuating these characters’ “indecentcy”, accordingly.

In *Watching the English* (2004), Kate Fox offers useful insights. Examining “the ‘grammar’ of Englishness”, two overarching elements of its rules are politeness and humour, musts of social acceptability, and “facilitator[s] to overcome” what Fox defines as English “handicaps”: “reserve and social inhibition” (p. 36). All this applies to the sex sphere, too. “I was continually struck by the difficulty of having any sort of sensible conversation about sex with English informants”, Fox confesses: “the English simply cannot talk about sex without making a joke of it” (p. 325). It should come as no surprise, then, that discussing the *Carry On* series – films that “engineered the most extensive and enduring intertwining imaginable of innuendo and Englishness” – Andy Medhurst (2007) identifies “sex jokes” as one of its key features.

Britain’s farcical approach to sex, Medhurst suggests, depends on the

inheritance of “a culture committed to and constrained by propriety”: that of “Victorian and post-Victorian England”. This cultural context spurred the use of euphemism and innuendo, as people “needed some means of utterance for talking about reproductive and excretory imperatives” (p. 135). Arguably, *Carry On* comedies show the same, “mediated” approach to “impoliteness” (Medhurst 1995: 2) and “vulgarity” (Medhurst 1992: 16), two features Medhurst identifies as distinctive of the British series, with double entendre another core element.

Windsor's comic sex-kittens (Susan and Sandra) are understandable within the comic traditions outlined above. Their Britishness can be demonstrated also by contrast. If one considers America's and Italy's 1960s and 1970s comic films about nurses, the sexy nurse's sexiness is more direct and explicit, not caricatural. Examples of Italian sexy nurses will be provided in the next section. As for America, besides the nurses featured in *M*A*S*H* (1970) – whom I focus on later – an emblematic character is Eve Bruce's La Marr in *Where Does It Hurt?* (US, 1972): a sexy nurse indeed, who consciously uses her physique as an invincible weapon for seductiveness. In representational terms La Marr, and other comic nurses of her type are more extreme examples of West's bombshell Lou in *She Done Him Wrong* as, appeal being equal, they display a more explicit use of sexuality, which is key to their power over men, who cannot resist their charms. Thus, unlike Windsor's Susan and Sandra, these American – and Italian – nurses exalt, instead of mocking, female sexuality.

Momentarily leaving aside this cross-cultural issue, it is undeniable that, just within the medical *Carry On* comedies, and despite their being sex-kitten caricatures, Susan and Sandra illustrate the increasing sexual exploitation of the

figure of the nurse in comedy. This also makes them borderline examples of the romantic nurse: in their case, the boundary between love and sex certainly is less demarcated than in Dorothy's. Within this spectrum, Windsor's Susan in *Carry On Matron* surely is the least disreputable, both in terms of professional and romantic behaviour. In representational terms, the same degenerative trajectory – from overall dignified in *Carry On Nurse*, to overall deplorable in *Carry On Doctor*, with *Carry On Matron* somewhere between the two – also affects Hattie Jaques's matrons.

Sandra in *Carry On Doctor* can plausibly be defined as *Carry On Matron*'s Susan's decadent version: whatever characterises the latter becomes extreme in Sandra. Both characters are obviously nurses, but while Susan is pretty good at what she does, and somewhat morally conscious, too – i.e. she does not hesitate to be straightforward with and about her unethical superior, Doctor Prodd (Terry Scott) – Sandra undertakes a nursing career only because she wants to seduce doctor Kenneth Tinkle (Kenneth Williams), who once “saved her life”, she says – though he simply treated her for tonsillitis. Love – which both films parody through camp characters³, double entendre and paradoxical situations – is another common aspect. However, while Susan eventually becomes Cyril Carter's (Kenneth Cope) official girlfriend, thereby crowning her romantic dream, Sandra cannot attain her love goal, as Tinkle harshly rejects her. Ultimately, in terms of characterisation, Susan can be defined as a not-really-dumb blonde, as she uses

³ David Bergman (1993) argues: “camp” is “first [...] a style [...] that favors 'exaggeration', 'artifice' and 'extremity'. Second, camp exists in tension with popular [...] commercial [...] or consumerist culture. Third, a person who can recognize camp [...] is a person outside the cultural mainstream. Fourth, camp is affiliated with homosexual culture, or at least with a self-conscious eroticism that throws into question the naturalization of desire” (pp. 4-5). In British cinema, *Carry On* is the archetypical camp film, with Kenneth Williams's characters identified as its most emblematic camp **examples**.

her looks for her own benefit. Sandra, instead, is blonde and portrayed as “dumb”, and is ridiculed in her unsuccessful romantic trajectory.

The features outlined above are constitutive of Susan's and Sandra's diverse embodiments of the parodic sex-kitten. Before meeting her new roommate “Cyrille” – later confessing to be Cyril – Susan is not straightforwardly associated with a sex-kitten nurse. In her first portrayal, set at “Finisham Maternity Hospital”, she assists unprincipled Doctor Prodd, showing evident distrust of his expertise. Her sceptical and subtly derisive expression and her detached posture while standing rigidly next to him, highlight this (figure 4.17). Meanwhile Prodd's expression while he idiotically fixes a pint of urine enhances by contrast Susan's wisdom and credibility. In a sense, these traits are distinctive of Susan, who is led by more ethical considerations in both her professional and love life: the fact of never appearing “unruly”, unlike other nurses and, once their love story starts, remaining faithful to Cyril, suggest this.



Figure 4.17



Figure 4.18

At this stage, however, Susan's picture is evidently incomplete: as we know, the sexy component is also crucial. This becomes apparent during her first meeting with Cyrille, set in the room they share. This scene is typical of the *Carry*

On films' type of humour, with childishly paradoxical situations and double entendre, primarily, generating laughter. Here, comedy resides in that Susan – in a typical “dumb blonde” fashion – absurdly seems convinced that she is dealing with a woman: thus, she freely changes her clothes in her roommate's presence, even asking the latter to help her undo her bra. This request makes Cyrille run away from the room, in seeming shock. In mock surprise at her roommate's reaction, Susan appears sorry, genuinely thinking this might be due to Cyrille's extreme prudery.

Scenes like this epitomise *Carry On Matron's* parodic – and arguably “soft” – approach to sexuality. In this respect, two elements of the scene are worth underlining. Firstly, Susan is evidently a sex-kitten caricature, her appearance mocking traditional canons of female beauty and sex appeal. Combining traits that are exaggerated and self-contradictory is crucial to this effect: indeed, while being very blonde and bosomy, Susan is not slender, and is ostensibly lacking in elegance. Her voluminous “beehive” hairstyle is clearly exaggerated, as are her shrill voice and laugh; her cockney accent (signalling her working-class origin) complements this “vulgar” portrayal, as do her manners, as seen in the careless way she takes her tights off (figure 4.18). The second aspect is that, in *Carry On Matron*, the reference to sex is rather elusive. Indeed, even in their more explicit representation, sex and carnality never go beyond the limits imposed by decency, conforming to the Puritan attitude underlying British culture. Thus, where partial nudity is displayed, carnal relations are not, and vice versa.

This emerges from the scene where nurse Cyrille's real identity as criminal Cyril is revealed. The news immediately renders Susan sincerely grateful to Cyril

as, in spite of everything, he was able to resist her naïve help request with undoing her bra. For this reason, eventually, she (wisely) kisses him on his cheek – a chaste gesture that, inevitably, culminates in a far more passionate kiss, in Cyril's bed. Despite the particular situation, both characters are here portrayed with their clothes on and, obviously, this helps tone down the level of sexual explicitness (figure 4.19).

Despite her naivety and at times provocative behaviour, Susan's unusual appeal and strength reside in her genuineness and moral fibre. Thanks to these features, she is able to capture Cyril's heart and, notwithstanding the superficial start to their love story, become his girlfriend. Besides, Susan's role in the romantic couple is also key to Cyril's redemption: by making clear that she would never be a gangster's partner, she motivates him to give up criminality. From this angle, then, Susan is also identifiable as a comic nurturing woman: a further element revealing her hybrid nature. Susan's combined traits result in a hybrid romantic/sex-kitten version of screen nurse: a less praiseworthy type than nurse Dorothy's, but more virtuous than trainee-nurse Sandra's.



Figure 4 19

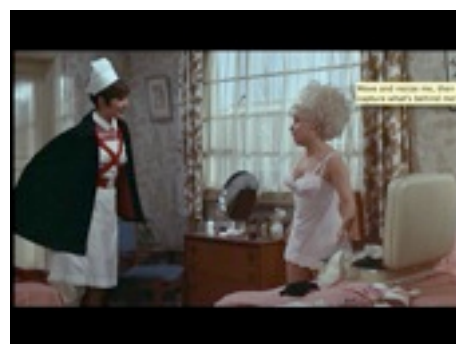


Figure 4 20

The latter's identity as a sexy dumb blonde parody is clear from her first scene. On her first day of training at "Borough County Hospital", Sandra is assigned a room to share: in her underwear, she unpacks her bag, while her roommate Clarke suddenly opens the door. Sandra starts, not expecting Clarke's arrival: "Oh! I thought you might be a man coming in!", to which Clarke replies: "Sorry to disappoint you!". While dialogue and performance confer on Sandra a distinctly silly air, which the contrast with Clarke's middle-class uprightness and moderation further emphasises, Windsor's appearance and working-class accent are, again, key to Sandra's identification as a caricatural sex-kitten. Sandra's "beehive" hairstyle (figure 4.20) reinforces this, a voluminous set replacing Windsor's Susan's more sober bob cut.

The same scene introduces the love theme, which is parodied here, too: still conversing with Clarke, Sandra takes out from her suitcase Doctor Tinkle's picture – her life-giving donor, she says (figure 4.21) – and contemplates it. Far older than Sandra, unattractive, evidently paranoid and, tellingly, playing her social superior – the hospital registrar – Tinkle is clearly uninterested in Sandra: when he first sees her in the hospital, he does hope that she was a hallucination. An overall unpleasant character, Tinkle also shows odd behaviour and ambiguous sexuality – traits that, as I mentioned, generally mark Williams's mostly middle-class characters, ultimately making them camp emblems, too. Here, Tinkle's choice as the paramour, and the farcical situation he is involved in, clearly generate the love parody.

Sandra's comically unrequited love for Tinkle is illustrated in her first (and last) meeting with him. She unexpectedly enters his room, her visit being

unwelcome: “What are you doing here? You must get out at once!”, Tinkle says. Regardless, Sandra stays, and even locks the door, eventually yelling: “I won’t leave your room until you say you love me!”. Meanwhile, Doctor Kilmore and the matron – in love with Sandra and Tinkle, respectively, and thus further sustaining the traditional nurse/doctor love configuration (here, clearly parodied) – eavesdrop outside. As Tinkle decides to open the door, Sandra hugs him tightly, thereby preventing him from escaping. The “victim” of mock physical abuse, Tinkle looks infuriated and shocked at once. Concurrently, the matron and Kilmore enter the room, obviously misunderstanding the situation (figure 4.22).



Figure 4.21



Figure 4.22

Compared to other sex-kittens of medical *Carry On* films, Sandra's way of expressing love is comically overstated, in a class-coded way. Romance is deprived of its traditional sublimation, and sexual instinct instead comes to the fore. This renders her a parodic romantic nurse: as such, she would indeed always disregard Kilmore's wooing, despite his being younger and objectively more attractive than Tinkle – who remains, instead, her love object. This contradiction generates comedy. The scene where Kilmore follows Sandra up to a roof where

she simply sunbathes – and not attempting to commit suicide, as he thinks – is revealing. Seeing Kilmore, Sandra cannot help shouting (figure 4.23) and promptly leaves.



Figure 4 23

While, in narrative terms, this scene highlights Sandra's faithfulness to Tinkle, on a performance level, her light blue bikini and hysterical reaction further mark her as a sexy dumb blonde caricature. The film evokes this same idea several times. For example, walking with a wiggle across the hospital courtyard, in an above-the-knee uniform and sexy tights, Sandra calls the attention of most men present. Ironically, though, once she arrives in the ward (figure 4.16), her male patients' response is not as enthusiastic: rather, Sandra's view makes them panic, as they distrust her nursing skills (this discrepancy between the normal expectations of a nurse and Sandra's bad practice acting as one of the comic devices of the film). Unlike *Carry On Matron's* Susan, Sandra is not a talented nurse: this deficiency – though partly due to her early-stage career – ends up a prevailing feature in her character, thereby further undermining her overall representation – hence, the public's perception of her character.

A parodic sex-kitten in love, working-class Sandra is typical of the romantic nurse's most extreme derision in comedian *Carry On* comedies. As we saw, her profile lacks certain crucial aspects – first of all, professional expertise – and exaggerates others – emotions and genuineness in particular. Yet, unlike Susan, these latter two features are not really a means to Sandra's power – or, rather, they are, but not in the way she desires: she cannot win over her beloved Tinkle but only Kilmore, whom she dislikes. If anything, despite the sentiment's preposterous nature, Sandra is coherent with her love for Tinkle. That said, Sandra certainly appears as the most derogatory representation of a nurse hitherto encountered.

The increasingly derogatory representation affecting the romantic nurse in medical *Carry On* comedies is also found in Hattie Jacques's matron-battleaxes. Exaggeration is a key feature also here, though in terms of Jacques's appearance and star persona rather than in sexual terms: “England's favourite overweight actress”, Jacques is, in comic form, “the personification of unmitigated sternness and uncompromising authority” (Kalisch & Kalisch 1987: 164). Thus, as in the case of celebrated historic “tough” nurses such as Edith Cavell and Florence Nightingale – strength and authority are characteristic of Jacques's matrons. However, the comic nature of the latter, exploiting behavioural and physical excess, removes the dignified aspect of her earlier counterparts, placing Jacques' figures in the realm of farce and derision.

Of the three Jacques's matrons, the *Carry On Nurse's* one is the least undignified. The Kalischs (1987), too, acknowledge this, defining this character as “wholly dignified [...] quite unlike the figure of fun into which she degenerated in

subsequent features” (p. 164). This matron is experienced, austere and authoritative, exerting control over both nurses and doctors, who treat her with respect and regard. On a visual level, however, her grotesquely “round” appearance and at times uncontrolled reactions – i.e. her bizarre expressions whenever something does not comply with what she expects – trivialises her leadership and invulnerability. The scene of her daily round in the ward is illustrative.



Figure 4.24



Figure 4.25

Expecting the matron's visit, the hospital staff are intent on securing order and neatness: panic dominates. As the camera cuts to the matron, the film's distinctive music motif alters to lower, sombre tones. This, along with framing, further emphasises the matron's “authoritarian” image (Hallam 1998: 34). A high angle long shot captures her entrance into the ward's corridor: the austere hospital environment jointly with the matron's soldierly walk result in a military-like atmosphere (figure 4.24), which the introduction of drums in the music reinforces. Like a soldier standing to attention, the sister nurse waits for the matron on one side of the corridor. Then, the round starts. Facing patients' misbehaviour, the

matron can hardly hide her bewilderment: comedy resides in her overtly incredulous expressions (figure 4.25), contrasting with her usual, controlled behaviour – which, in the context of British comedy, is also emblematic of her middle-class extraction.

The comic side of *Carry On Nurse's* matron is not pronounced enough to undermine her emotional austerity and leadership, which thereby remain her predominant traits. This explains the Kalischs' (1987) view of this matron as “an interloper in the ward's closed comic world” (p. 164). By recalling a military figure, this matron is closer than those of *Carry On Matron* and *Doctor* to the original meaning of the battleaxe: rigour and discipline aptly counterbalance her otherwise comic characterisation.

Certainly, the same military parallel is not applicable to *Carry On Matron's* matron, a staunch professional who, however, appears far more maternal and “human” than her *Carry On Nurse's* counterpart. These latter two features, in turn pivotal to a nurse, compensate for her less austere qualities, thereby making her profile – marked by physical excess, and thus laughable – convincing in a different way. This matron is tender with patients (figure 4.26) – in this instance, mothers and babies – and attentive to the medical staff – both nurses and doctors. The latter here also reveals the matron's “non-professional” side: for example, when off-duty, she secretly enjoys a medical TV series with her friend, Doctor Goode (Hawtrey). Moreover, she ends up marrying odd surgeon Sir Bernard Cutting (Williams), therefore not sacrificing her “extra-professional” goals because of her career – thus, complying with the nurse film's classic love narrative.



Figure 4 26



Figure 4 27

As I mentioned, the “grotesque” notion is foundational to this character. Noticeably, however, the matron's look has changed since *Carry On Nurse*: her hair, once dark and almost totally covered by a veil, is now blond and loose; and her bodily shape slightly rounder. Such lighter colours and plumper forms along with a less austere outfit suggest a sweeter and more down-to-earth – but less powerful – individual. Though in a comic register, these combined features ultimately make *Carry On Matron*'s matron more appealing to men than her *Carry On Nurse* counterpart: her final union with Cutting suggests this. This latter aspect somewhat contradicts scholars' identification of female fatness as the recipient of male worries (Rowe 1995: 63); however, in the context of comedy, *Carry On Matron*'s matron's supposed attractiveness clearly serves to underline her identity as an ambiguous comic target. The scene of her night screening with Doctor Goode is illustrative.

Goode reaches the matron's room with a bottle of sherry, making sure nobody sees him. She welcomes him enthusiastically, in her nightgown. The spectators do not know the real purpose of the meeting and, until this is disclosed, dialogue and the characters' affectionate behaviour suggest they are having an

affair, since Goode is married. The misunderstanding is cleared up once the TV programme starts, which captivates the pair (figure 4.27). Cutting's visit interrupts this enjoyable moment, leaving Goode with no option but hiding in the wardrobe. Unexpectedly, Cutting starts to insistently court the matron.

Though shocked by Cutting's behaviour, and afraid he may find Goode in the room, the matron manages the situation, at least initially. Indeed, she treats Cutting respectfully and, though evidently flattered by his attentions, tries to keep her distance from him (figure 4.28), in order not to compromise their respective professional reputations. Yet, the inevitable happens: Goode smokes in the closet, and Cutting finds him, which leads to a huge misunderstanding.



Figure 4 28



Figure 4 29

Despite the puerile and clearly comic motivation marking the beginning of their story – Cutting wants to prove his masculinity to the matron – the two eventually marry. Being already a successful professional, in part because of her warm and thoughtful character, the matron manages through her marriage to succeed in her private life too. Drawing on Rowe's argument, this occurs because she can adroitly use the “spectacle” of her “excessive” body to finally capture

Cutting's heart. From a purely comic angle, instead, the paradoxical romance of these two camp characters obviously aims at parodying love, as often happens in *Carry On* films. As we will see, a different narrative trajectory affects *Carry On Doctor's* matron.

The latter clearly is the most excessive of the three Jacques's matrons: in her, everything is emphasised to the extreme – the outcome being romantically unrewarding and professionally discrediting. Indeed, like *Carry On Matron's* matron, she is in love with a doctor – Tinkle (Williams) – but despite her efforts, her sentiment is never reciprocated. Moreover, like *Carry On Nurse's* matron, she is severe and authoritarian, but often uses her power for unfair purposes – i.e. she suspends nurse Sandra as, ultimately, she is her love rival; and supports Tinkle's unjust dismissal of Doctor Kilmore to simply attain Tinkle's approval.

While in ethical terms this matron clearly misuses her authority, thereby being reprehensible, from a feminist angle she represents a more complex character, “investing in her weight” to pursue her objectives. This latter idea is conveyed through the matron's depiction as the subject of the laughter she originates. Her approach to young Doctor Kilmore when she catches him eavesdropping outside Tinkle's room is one example. Made suspicious by Kilmore's behaviour, the matron asks him for an explanation; as he attempts to hide the truth, she forcefully pulls his stethoscope out of his ears. In pain, Kilmore cannot do anything but look idiotically at her (figure 4.29).

In this case, laughter emerges from the grotesque contrast between the matron's massive bulk and force, and Kilmore's slim physique and impotence – a picture that, this time, complies with Rowe's (1995) idea of “the transgressive,

round female body” being the bearer of “masculinist [...] fears of ageing and death” (p. 63). This also applies to the scene of the matron's unexpected night visit to Tinkle. Here, her outfit – rendering her figure even more grotesque – further enhances laughter: a sexy nightgown and loose hair replace her austere uniform and hairstyle.

Intent on seducing Tinkle, the matron arrives in his room with a bottle of sparkling wine. Tinkle's unease is evident, and increasingly so as she manages to push him against a wardrobe, preventing him from moving while attempting to appear charming. A close-up captures this moment, enhancing the two characters' contrasting expressions, and giving the matron supremacy (figure 4.30). Tinkle still puts up resistance, which leads the matron to subtly start blackmailing him – again, camouflaging her real intention through a flirtatious smile: “wouldn't it be awful [...] if someone found out that Doctor Kilmore was right about you having a girl in your room that night?”. At last, her determination – and size, too – prove effectual: Tinkle ends up in his bed, his body surrounded and constrained by the matron's (figure 4.31).



Figure 4.30



Figure 4.31

As the above analysis showed, even at their most extreme, Jacques's matrons are never passive or totally objectified. In fact, by using their own grotesque spectacle to further their ends, such matrons manage to attain subjectivity and a degree of agency that subverts traditional social and gender roles. From this perspective, then, these matrons plausibly embody female power – albeit in a comic form, which in turn diminishes this power (in part, arguably, by making the character a source of male castration anxiety).

My study of the nurse's representation in comedian comedies ends with a focus on the “carnavalesque nurse” image. Scholars have never given particular attention to this particular type – resulting from the comic practice of male-to-female cross-dressing – despite its widespread presence in the genre. Significantly, carnivalesque nurses are displayed in all three *Carry On* films I examine, though only in *Carry On Matron* as a protagonist: nurse Cyrille. This “nurse” actually is an incompetent thief in disguise, Cyril Carter (Kenneth Cope), whose criminal father (Sid James) has forced to steal birth control pills from the hospital.

At first sight, Cyrille's characterisation seems controversial. “She” obviously is another caricature of both women and nurses, based on the notion of gender inversion. That said, her identification as a laudable nurse, and her subversive approach to gender inequality – a notion lying at the basis of male-to-female cross-dressing (Stacey 1994a) – can be said to compensate (albeit, in a comic key) for her “defective” sides.

In Cyrille's characterisation as a nurse, exaggeration is key, as it often relates to pivotal features of the profession. For example, she features the front

page of various newspapers thanks to her excellent job in assisting the delivery of an actress's triplets (figure 4.32). The matron acknowledges her skills by remarking, with typical *Carry On* innuendo, that Cyrille has “that extra little something that the others haven't got”. Moreover, though just pretending to be a nurse, Cyrille can overall conform to the profession’s ethical code, even when facing tempting situations. One example is her first meeting with Susan Ball, previously analysed.



Figure 4 32



Figure 4 33

Besides her being – potentially – a model nurse, from a feminist angle Cyrille also represents an interesting case study in terms of the cross-dressing/gender relationship. Indeed, if the fact of evidently being a man disguised as a woman renders Cyrille laughable (this being her comic nature’s essence), her funny misadventures with Doctor Prodd's (Terry Scott) insistent courtship ultimately enable Cyrille to experience an aspect of women’s actual experience – in this case sexual harassment. Somewhat, this challenges strict gender dichotomies, advocating what Stacey (1994a) defines as “more fluid forms of sexual and gender identification” (p. 102).

Prodd's wooing of Cyrille begins right upon her arrival at the hospital.

There, everyone considers Prodd a *Casanova*, as he cannot help approaching young female patients and collecting nurses “like some men collect big game trophies”, Susan Ball says. Though disgusted and scared by his behaviour, Cyrille promptly understands that Prodd may be a useful source of information for stealing the pills. Thus, sacrificing herself, she arranges to privately meet him. Fully sympathising with women, Cyrille initially appears frightened: she stands in the foreground of a medium shot, rigid, with her eyes looking worriedly downward. Meanwhile, Prodd – in the background – looks over her back profile, and locks the door (figure 4.33). Inevitably, the situation degenerates: Prodd starts running after Cyrille, trying to touch her. Eventually exasperated, Cyrille even decides to use her male physical force: violently pushing Prodd away from her, she then safely leaves the room.

While depicting Cyrille as a “fluid identity”, in sympathy with the female sphere, this scene also returns to the concept of subjectivity and spectacle as a means to power. Indeed, as a woman, Cyrille uses her “spectacular” body and its attributes to first seduce and then brutally abandon Prodd. This approach to men, subverting patriarchal gender hierarchies, makes it possible to equate this carnivalesque nurse with the other nurses presented in this section – characters overall far from being passive. My analysis of the romantic types – model Dorothy Denton and her parodic counterparts, sex-kitten Susan Ball and Sandra May – and of Jacques's matron-battleaxes has demonstrated this.

As in the case of “funny nurse” Joanna Jones, and of the nurses examined in the previous chapter, hybridity turns out to be a key concept also in these *Carry On* nurses. The value of hybridity shall be discussed in more detail in the chapter's

conclusion, insofar as this feature also affects the nurses of Italy's *commedia sexy*, to which I now turn.

4.2 Italy's *commedia sexy* and its nurses

In *A History of Italian Cinema* (2009), Peter Bondanella identifies Italy's *commedia sexy* as one of “several groups of comic films [that] appeared during the height of popularity of 'commedia all'italiana'” (“comedy Italian style”) (p. 211). The latter started in the post-war period, and featured the work of directors like Mario Monicelli, Luigi Comencini, Dino Risi, Alberto Lattuada, Pietro Germi and Lina Wertmüller – whom Bondanella sees as the “economic backbone of the film industry” in Italy and in its “most popular film genre” (p. 180).

Like *commedia dell'arte*, its generic precursor, *commedia all'italiana* relies on a series of comic types – i.e. the star-crossed lovers, the quack doctor and the shyster lawyer – and part of its national specificity was to combine laughter with a sense of despair. This results in a seeming tragicomedy, which differentiates *commedia all'italiana* also from both its Fascist and Neorealist counterparts. *Commedia all'italiana* occurred as a filmic phenomenon during Italy's economic miracle (1950-63) (Crafts & Toniolo 1996), a period marked by “the painful contradictions of a culture in rapid transformation” (Bondanella 2009: 181). Though underestimated by the Italian critical elite at the time, *commedia all'italiana* is now acknowledged as offering a certain critical insight into Italy's post-war conditions, especially in relation to its “dysfunctional social institutions, reactionary laws, and outmoded customs governing the relationships between men and women” (Bondanella 2009: 181).

To some extent, this also affects Italy's *commedia sexy*, one of *commedia all'italiana*'s sub-groups and the subject of my analysis here. Possibly finding its origin in Alessandro Blasetti's 1959 risqué documentary *Europe by Night*, the apogee of *commedia sexy* occurred in the 1970s. Bondanella (2009) argues that films like Federico Fellini's *La dolce vita* (1960), Gualtiero Jacopetti's *Mondo cane* ("A dog's world", 1962) and Pietro Germi's *Signori e signore/The Birds, The Bees, and the Italians* (1965) were also influential, as they "pushed the barriers of what [was] permissible in cinema insofar as sexual matters were concerned" (p. 214). Gian Piero Brunetta (2009), instead, pays tribute to Pierpaolo Pasolini's *Decameron* (1971), after whose release "it seemed that Italian cinema wanted to make the most of universal erotic literature" (p. 274). Indeed, in 1972, a series of literary-based sexy comedies came out: Marino Girolami's *Decameron proibitissimo/Sexy Sinners*, Gian Paolo Callegari's *Le calde notti del Decameron/Hot Nights of the Decameron*, Italo Alfaro's *Canterbury proibito* ("The Forbidden Canterbury [Tales]") and Mariano Laurenti's *Quel gran pezzo dell'Ubalda tutta nuda e tutta calda/Ubalda, All Naked and Warm*.

This was possible also because, in 1962, Italy saw the promulgation of its "long-awaited new law" on censorship, under which "films could only be denied a general release on the grounds of seriously offending a generically defined 'common sense of decency'" (Moliterno 2008: 75). This law came exactly seven years after the publication of a manifesto aiming to change the oppressive film censorship in force at the time, and signed, among others, by Michelangelo Antonioni, Alessandro Blasetti, Vittorio De Sica and Federico Fellini. One way or another, most sexy comedies eventually managed to comply with the

requirements of this and the subsequent censorship laws. Bondanella (2009) argues that these films “stopped short of the 'cinema hard', or true pornography” (p. 214) – which, despite the Vatican’s strong influence in Italy, was prominent, with well-known pornographic stars including Ilona Staller, Moana Pozzi and Rocco Siffredi (Buttasi & D’Agostino 2000; Giovannini & Tentori 2004).

Barbara Creed's (1994a; c) work helps identify what, in general terms, differentiates pornographic productions from erotic or sexy ones. As she argues, “pornography induces purely genital arousal leading to masturbation”, and is “mechanical, sexist, dehumanizing, impersonal, and obsessed with phallic themes” (p. 137), presented through “close-up shots of genitalia and their interactions” (p. 318). Instead, “the erotic does not have to involve scenes which are sexually explicit” and, although feminist views on the topic are diverse, everybody agrees on the fact that while “pornography [...] tends to be used pejoratively, eroticism is seen as more elevated” (p. 137).

In the *commedia sexy*’s case, as the name suggests, the sexual component is merged with humour, which overall attenuates these films’ erotic character. The level of eroticism varies from film to film: this is true also of the sexy comedies about nurses I shall introduce shortly. Overall, eroticism is mainly conveyed through the emphasis on female bodies, often ending up in various states of undress. Nudity, however, is not the prevailing feature, and is displayed in accordance with the limits of decency censorship imposed. The contrast between beautiful women and conventionally unattractive and highly impulsive male characters, usually styled as Latin lover caricatures, is instead a prime source of *commedia sexy*’s laughter. The best-known representatives of these two types are,

respectively, actresses Edwige Fenech, Gloria Guida and Barbara Bouchet, and actors Lino Banfi, Alvaro Vitali and Pippo Franco.

Despite their simple plots and humour – “nothing but a mix of prankish jokes, one-liners, and double entendres” (Brunetta 2009: 275) – *commedia sexy* – like *commedia all'italiana* – has recently been re-evaluated. In this respect, Brunetta (2009: 273) mentions one significant episode. During Massimo D'Alema's two-year left-wing government (1998-2000), Oliviero Diliberto, a member of D'Alema's party, advocated the greater importance of Banfi – perhaps, *commedia sexy*'s most typical male actor, and indeed one of *L'infermiera di notte/Night Nurse*'s (1979) protagonists – over internationally famous directors like Antonioni (Gian Antonio 1998). In so doing, Diliberto endorsed Italy's new generation of film critics, conferring cult status on the country's 1970s low-budget “trash” films.

Diliberto's provocative view helped revive *commedia sexy*'s critical appreciation. Typical commentaries on these comedies had included, for example, R. Chiti's (1972) review of Laurenti's *Quel gran pezzo dell'Ubalda, tutta nuda e tutta calda*, “a coarse grain comedy”, whose “nauseating exhibition of naked bodies is functional to fill the lack of narrative resulting from the film's confused script”. By contrast, Brunetta (2009) argues that *commedia sexy* not only represented “a receptacle for Italian vaudeville-era comics”, securing them additional years of popularity, but also – and despite its B-movie production values – lacked “by no means [...] in craftsmanship”: transforming eroticism into a form of “teenage voyeurism”, it filled the “missing act” by “exhibiting the scantily clad bodies of beautiful young women” (pp. 274-5).

Most importantly, Brunetta underlines that, with its actors performing “in the most politically incorrect manner”, these films meritoriously touched on taboo themes in 1970s Italy – i.e. homosexuality – and also delved into the delicate spheres of religion, politics and critiques of the patriarchal family. While depicting priests who “do not hesitate to run their hands up the skirts of their young parishioners”, *commedia sexy* “portrayed politicians from both the right and the left as corrupt, inept thieves”. For these reasons, Brunetta compares *commedia sexy* to “a mail order catalogue” that “offers every dysfunctional and negative element of the Italian society in the post-Economic Miracle era” (pp. 275-7).

Released in 1979, *L'infermiera di notte* is neither the first *commedia sexy* featuring a nurse as a protagonist – the release date of Nello Rossati's *L'infermiera/The Sensuous Nurse*, and Mario Bianchi's *L'infermiera di mio padre/My Father's Nurse* being, respectively, 1975 and 1976 – nor Mariano Laurenti's only *commedia sexy* on the subject, since his *L'infermiera nella corsia dei militari/The Nurse in the Military Madhouse* also came out in 1979. Nurses, in fact, were not the only professional women featured as protagonists in *commedia sexy*, as Laurenti's and other directors' filmographies testify.

Indeed, Laurenti directed sexy comedies about a range of female professions: teachers – *Classe mista* (“Mixed-sex class”, 1976), and *L'insegnante va in collegio/The Schoolteacher Goes to Boys' High* (1978) – secretaries – *La segretaria privata di mio padre* (“My father's personal secretary”, 1976) – female students – *La compagna di banco* (“The female deskmate”, 1977), *La liceale nella classe dei ripetenti* (“The highschool girl in the remedial class”, 1978), *La liceale*

seduce i professori/How To Seduce Your Teacher (1979), *La ripetente fa l'occhietto al preside* ("The female student repeating the year winks at the headmaster", 1980) – and nuns – *La bella Antonia, prima monica e poi dimonia/Naughty Nun* (1972). Likewise, Nando Cicero directed *L'insegnante/Sexy Schoolteacher* (1975) and *La dottoressa del distretto militare/The Lady Medic* (1976); Michele Massimo Tarantini, *La poliziotta fa carriera/Confessions of a Lady Cop* (1976), *L'insegnante viene a casa* ("The teacher makes a house visit", 1978) and *L'insegnante al mare con tutta la classe* ("The teacher goes to the beach with the whole class", 1980); Giuliano Carnimeo, *L'insegnante balla... con tutta la classe* ("The teacher dances... with the whole class", 1979); Silvio Amadio, *Il medico... la studentessa* ("The doctor... the female student", 1976), and Giuliano Biagetti, *La novizia* ("The novice", 1975), to mention a few. The overall sexy comedies' production between the 1970s and the 1980s was actually far more extensive. To give some idea, the sole contribution of the directors mentioned above – a half of the most famous – to the sub-genre's corpus amounts to around 110 films.

Though, in some cases, less comic and more erotic, a similar type of sexy cycle – portraying several categories of female professionals, including nurses – characterised 1970s America, too. The set of moral censorship guidelines that had affected American cinema from 1930, known as the Production Code, was abolished in 1968. Although "sex in American cinema [...] existed long before [...] the 1960s", Jody Pennington (2007) argues, the Code's demise obviously gave "greater visibility" to "nudity and sex" (p. 17). A key reference in this more libertarian context is Roger Corman with his New World exploitation films, on

which I will focus shortly. In less extreme form, Robert Altman's comedy *M*A*S*H* (1970), with blonde sex object nurse Margaret "Hot Lips" Houlihan (Sally Kellerman), is also representative.

As a character, Houlihan originated in Richard Hooker's 1968 novel *MASH: A Novel About Three Army Doctors*, on which Altman's feature is based – being followed by a long-running, highly successful, eponymous TV series. Set in 1951 South Korea, during the Korean War, *M*A*S*H* tells the story of a medical unit at a Mobile Army Surgery Hospital. Upon the arrival of the new surgeons Hawkeye Pierce (Donald Sutherland) and Duke Forrest (Tom Skerritt), the peaceful camp turns into a crucible of chaos: Pierce and Forrest cannot stand their pious colleague Major Frank Burns (Robert Duvall), who reciprocates the antipathy. The situation degenerates when "chest cutter" Trapper John McIntyre (Elliott Gould) also joins the unit, aligning himself with Pierce and Forrest against Burns. On his side, Burns finds an ally in the head nurse Houlihan, a champion of military discipline, who cannot stand Burns' unruly "antagonists". Burns and Houlihan's relationship becomes increasingly intimate: against their strict ethics, they end up lovemaking – an act publicly broadcast in the camp due to a hidden microphone in Burns's tent. Hence, Houlihan's "Hot Lips" nickname, and Burns's nervous breakdown – which leads him away from the unit.

Through the success of the film, Houlihan became an internationally famous cinematic incarnation of the nurse as sex object – an image actually applying to most nurses in *M*A*S*H*. However, while the latter are immediately identifiable as brainless sex providers for doctors, Houlihan is (theoretically) constrained by prudery. Herein lies her "special" sex appeal. As in the nuns' case, where chastity

and thus physical inaccessibility generate sexual fantasies, Houlihan ultimately is more exciting for doctors than the beautiful but sexually available nurses she leads. Concurrently, Houlihan's strict behaviour in public makes her disliked professionally, and an easy target for sexual ridicule in the libertarian 1970s. She is a hybrid, combining physical attraction with military rigour, but is, ultimately, the object of laughter.

The humiliating scene where Houlihan is shown naked to an assembled audience whilst taking a shower – as the tent under which she stands is suddenly yanked off – is exemplary of the above point. Highly embarrassed, Houlihan tries to cover her body, eventually lying prone on the floor, while doctors (sexually) and nurses (sarcastically) enjoy the spectacle, yelling: “Bravo!”. The reason for this joke, staged by doctors supposedly to verify whether Houlihan is a natural blonde, further underlines her character's trivialisation – namely, the combination of propriety and military manners generates both sexual fantasies and professional hostility.

While partaking of the period's libertarian ethos, *M*A*S*H*'s approach to the depiction of Houlihan, and of nurses more generally, evidently is not devoid of misogyny: outside the operating room, nurses are invariably treated as sex objects, as illustrated by the nicknames doctors give to these women – i.e. Hot Lips, Scorch, Dish, Knocko. The process clearly diminishes the nurses' professional standing by reducing them to (sexualised) bodies. Thus, *M*A*S*H* is emblematic of the nurse's increasingly derogatory depictions in 1970s cinema, here with special regard to American comedy.

A highly sexualised treatment of nurses also distinguished Corman's New

World series of exploitation films featuring working women. Opening the series, and inaugurating a proper cycle on nurses, was Stephanie Rothman's *The Student Nurses* (1970) – followed by George Armitage's *Private Duty Nurses* (1971), Jonathan Kaplan's *Night Call Nurses* (1972), Clint Kimbrough's *The Young Nurses* (1973) and Candice Rialson's *Candy Stripe Nurses* (1974). “New World Pictures” also focused on teachers – with Kaplan's *The Student Teachers* (1973) and Barbara Peeters's *Summer School Teachers* (1974) – stewardesses and models – in Cirio H. Santiago's *Fly Me* (1973) and *Cover Girl Models* (1975), respectively – and actresses, in Allan Arkush and Joe Dante's *Hollywood Boulevard* (1976).

Rothman's case is of particular interest. The initiator of the so-called nurses' cycle, as well as the director of other films portraying sexy female professionals, for example *Working Girls* (1974), Rothman is first and foremost a director who made her career in the women's exploitation genre. Her unusual profile as a woman director has called feminist film critics' attention since the 1970s. In “‘Exploitation' Films and Feminism” (1976), Pam Cook offered a ground breaking reading of exploitation cinema, focusing on Rothman. Cook's argument is that exploitation cinema is “potentially less offensive [to women] than mainstream Hollywood cinema”, insofar as the latter has “naturalised” its forms, as “an attempt to efface and suppress contradictions”. By contrast, exploitation cinema puts up “resistance to the 'natural'”, thereby allowing its spectators to take “a critical distance on the metalanguage of mainstream cinema” thanks to its “overt manipulation of stereotypes and genre conventions” (124-5).

Rothman's repertoire fits this scenario: though her films “cannot in any

sense be described as feminist”, Cook says, “they work on the forms of the exploitation genres to produce contradictions [...] which disturb the patriarchal myths of women on which the exploitation film itself rests”. Cook argues that emblematic of this background is “the positive-heroine stereotype”, a woman put “in the man's place”, and who “rests on the possibility of [...] becoming the subject rather than the object of desire [...] seen totally in terms of male fantasies and obsession” (126-7). Clearly chiming in with Rowe's argument about women's representation in comedy, Cook sees in what she calls the positive heroine, “a distinct stereotype image, accompanied [...] by a certain style of film-making” that “has the effect of parodying those styles and the accompanying stereotypes”. Hence, as Cook concludes, “if the films of [...] Rothman are to mean anything to feminists it must be in terms of the ways in which they manipulate the stereotypes and codes of the exploitation genres to create new meanings for women” (126-7).

The Student Nurses features four young women, each of whom is representative, as in Cook's argument, of a distinct female stereotype, and whose trajectory is conventionally marked by heterosexual romance. The blonde “bombshell” Phred (Karen Carlson) is with a handsome gynaecologist (although she happens to sleep with his roommate, too); the free-spirited hippy Priscilla (Barbara Leigh) falls for a drug-addicted biker; the social justice champion Lynn (Brioni Farrell) is involved with a Latin American revolutionary; and the sensitive Sharon (Elaine Giftos) reciprocates the love of a terminal patient she nurses. As the protagonists of a soft-core exploitation film, (most of) these nurses are shown naked, and having sexual intercourse, too.

Undoubtedly, we can agree with Cook that the film's blatant use of

stereotypes and conventional narratives allows the audience to take a critical distance from its metalanguage, which help undermine the stereotypes from the inside. There is however another point worth making: *The Student Nurses*' nurses are allowed a degree of agency within the narrative as well as some political consciousness, which makes them more sympathetic to a female audience than *M*A*S*H*'s Nurse Houlihan, whose representation is, instead, misogynist in confining them to the role of sex objects. Notwithstanding the risks, Priscilla tries LSD and choses to abort; Sharon decides to continue with her love story, even if she is aware her boyfriend will die soon; Lynn rejects a hospital position to keep on offering free nursing assistance to the discriminated Latin American community of Los Angeles (where the film is set), thereby pursuing her ideal of social justice; and Phred appears to know what she wants: she leaves her attractive doctor boyfriend to accept another job offer. Echoing both the feminist debates at the time and, arguably, Rothman's position as a woman director, the film stages Priscilla's abortion in an enlightened fashion. After Priscilla is turned down for a legal abortion by the hospital where she works, the operation is performed at home by Phred's gynaecologist boyfriend (helped by Sharon and Lynn) as a straightforward procedure that is successful and entails no punishment for Priscilla – in the process advocating women's abortion rights.

Despite the cultural differences between American and Italian cinema, Cook's argument about the “positive-heroine stereotype” fits *commedia sexy*'s nurses, too. Notwithstanding their greater or lesser levels of nudity, professional ethics, and female stereotypes' embodiment, all these sexy nurses share the fact of being far from passive subjects, and thus may be analysed using Cook's paradigm.

Once again, this is especially apparent in their relationship with male patients or doctors, whom they dominate and render subservient thanks to their attractiveness and professional position. These nurses also show a certain enigmatic allure: either consciously or not, they always end up being involved in some sort of deceitful or professionally ambiguous situations, from which they can anyway always take advantage, eventually undefeated.

Thus, none of them is ever punished. Although not “unruly”, these sexy nurses thereby happen to share the same positive narrative trajectory as the unruly woman Rowe theorised (1995: 17-8): in so doing, they also expand the range of comic female types complying with this feature. The control over men the Italian sexy nurses exert thanks to their sex appeal is certainly key to this end, as it secures their success. Another important factor is that most of these sexy characters turn out eventually to be competent nurses: whatever the particular circumstance they face, caring for patients always remains a key concern. From this angle, the lack of punishment can then be interpreted as a reward for their professional behaviour.

A mixture of sensuality and enigmatic allure mixed with varying degrees of moral uprightness combine in these nurses, making them overall hybrid figures. In all the films I consider, the sexy nurse is always the pivotal point between the frustration of desire and its fulfilment, namely the dual space through which comedy impacts each plot.

Ursula Andress's Swiss Anna in Rossati's *L'infermiera* is arguably *commedia sexy*'s most erotic nurse. Her way of displaying nudity is key to this end, not always being mediated by comedy. In this film, nudity (including, at

times, briefly, full frontal) is more prominent than in the other comedies on sexy nurses I shall discuss. Anna is a highly attractive woman, whom her ex-patient and lover Benito (Duilio Del Prete) – a *Casanova* caricature – recruits to assist his father-in-law, the rich Leonida Bottacin (Mario Pisu), whose heart is seriously damaged but still beating. Benito wants Anna to seduce Leonida to make the latter suffer a fatal heart attack: this shall permit Benito to inherit Leonida's money. Anna accepts but, once at Leonida's, she does not observe Benito's request since, she says, she cares about her patient – although, she also appears interested in taking over his capital, like the rest of Leonida's family. Eventually, Leonida recovers, disowns Benito and marries Anna. Claiming to care about her husband's health, Anna sleeps in a separate bed during their honeymoon. Yet, she does this completely naked, thus making Leonida suffer a fatal heart attack, and inheriting his fortune. Therefore, the film first pits Anna against the corrupt family, as a principled professional, but then, nevertheless, shows her ultimately to be equally motivated by money and treacherous.

In terms of nurse types, Daniela Giordano's Daniela in *L'infermiera di mio padre* is similar to Anna. Applying the unusual but effective medical theories of the German doctor with whom she collaborates, beautiful Daniela treats her patient, the Prince of Leuca (Francesco Mulè) – a Latin lover caricature, disabled because of a heart attack – through the visualisation of sexually arousing images, including her own – clearly, the film's device for including erotic images. In doing so, Daniela ostensibly means to accomplish her duty, with no ulterior motive. Indeed, once the Prince recovers, and despite he is obviously attracted to her, she leaves him, remarking that her job has finished.

Among *commedia sexy*'s nurses, Anna and Daniela display the most ambiguous conduct, and are also the most sexually provocative. This latter point draws our attention back to the theme of nudity. Indeed, Anna and Daniela often get undressed intentionally, performing a striptease in front of their patients, and thus the spectator. Moreover, their naked bodies' visualisation is not always accompanied by comedy, which increases the scene's overall level of eroticism. This scenario especially distinguishes Anna. The scene where she bathes in Leonida's swimming pool completely naked is a telling example. Seen in long shot, she takes off her bathrobe: the former James Bond star's voluptuous and athletic body is now fully visible, frontally shot, and secretly looked at (in a classic voyeuristic motif) by Leonida's adolescent male relative Adone – for whom Anna, later, also deliberately strips. The scene's eroticism is relatively toned down when Anna plunges into the pool, her body partly hidden by the water (although also displayed in an under-water shot). The scene ends, however, with comedy: one of the film's farcical men passes by the swimming pool, notices Anna and, prey to ecstasy, falls into the water.

Interestingly, both *L'infermiera*'s and *L'infermiera di mio padre*'s nurses are not Italian. This recalls Geraghty's argument about Britain's approach to sexy characters' representation as foreign women, mainly. While Giordano is Italian and only plays "the foreigner", Andress is Swiss. This has possibly reinforced her erotic charge – which, Andress's stunning physique aside, was located in her star status as an international sex symbol, originating in her ground breaking role in the 1962 *Dr No*, followed by her appearance in the 1967 *Casino Royale*.

The moral attitude distinguishing Britain's and Italy's representation of

sexuality is likely to be symptomatic of their respective religious inheritance. The *Carry On* films have already provided signs of Britain's Puritan approach to the representation of sex. As for Catholic Italy, Anna's and Daniela's respective Swiss and German provenance is important. Switzerland and Germany were protagonists in the Protestant Reformation, causing Catholicism's fragmentation in Western Europe. As products of "sinful" countries, Anna's and Daniela's more audacious behaviour is self-explanatory – and, unsurprisingly, different from that of *commedia sexy*'s Italian nurses.

Indeed, Gloria Guida's Angela in *L'infermiera di notte* and Nadia Cassini's Grazia in *L'infermiera nella corsia dei militari*, both Italian nurses, project a more "innocent" type of sexuality. This impression arises from several factors. First, these nurses are younger and more naïve. Moreover, their way of approaching male patients diverges, in certain important respects, from that of foreign Anna and Daniela. Overall, Italian Angela and Grazia are affectionate and warm with their male patients, but none of them tries to sexually provoke them, at least intentionally. For example, Grazia shows her bottom to a group of male patients because her superior, Doctor Amedeo La Russa (Lino Banfi), asks her to, to prove his injections are not painful. By contrast, foreign Anna and Daniela appear more detached and cold. Concurrently, as we saw, they both consciously seduce the people they take care of. The latter, in all the films considered, are mainly grotesque caricatures of the Latin Lover: ill, unappealing and usually old men.

In what follows, I will concentrate on the Italian sexy nurse figure, taking *L'infermiera di notte*'s protagonist, nurse Angela Della Torre, as an example. An emblematic *commedia sexy*, *L'infermiera di notte* also features one of the sub-

genre's most representative actresses, Gloria Guida, as the nurse-protagonist.

The innocent sexy nurse: Gloria Guida in L'infermiera di notte (IT, 1979)

In 2005, Gordiano Lupi, an Italian writer who grew up during *commedia sexy*'s apogee, published *Le Dive Nude* ("Nude Divas"). Initially, Lupi meant to focus the entire book on Guida, "the blonde dream of his generation" (p. 11). On second thought, Lupi extended the study also to Fenech, another key actress of the current, who starred in famous films like *Quel gran pezzo dell'Ubalda, tutta nuda e tutta calda* (1972) and *Giovannona Coscialunga, disonorata con onore* (1973). French-Algerian Fenech, however, represented a more mature type of woman than Guida: while the first interpreted the sexy teacher and the sexy doctor, the second was the sexy student and the sexy student nurse⁴.

Guida started her career as a singer, and moved to *commedia sexy* at the age of 19 with *La ragazzina/Monika* (1974). Occasionally, she even sang in her films: in *L'infermiera di notte*, for example, she launched her single "La musica è" ("Music is"). Blonde, with a beautiful "baby face" and a stunning body, Guida promptly became the image of sensual youth: paraphrasing Lupi, "Guida embodied the freshness and the purity of a young woman, of an adolescent who is aware of her erotic charge" (p. 12). Hence, Lupi says, her films were not

⁴ Fenech played the teacher in *L'insegnante* (1975), *L'insegnante va in collegio* and *L'insegnante viene a casa* (1978); and the doctor in *La dottoressa del distretto militare* (1976), *La dottoressa sotto il lenzuolo* (1976), *La dottoressa ci sta col colonnello* (1980) and *La dottoressa preferisce i mariani* (1981). Guida interpreted the student in *La liceale* (1976), *Il medico... la studentessa* (1976), *La liceale nella classe dei ripetenti* (1978), *La liceale seduce i professori* (1979) and *La liceale, il diavolo e l'acquasanta* (1979); and the nurse in *L'infermiera di notte* (1979).

pornographic: seen today, they rather appear as “innocent comedies, almost for teenagers” (p. 124).

Lupi's perspective becomes more intelligible if one considers the distinction between pornographic and erotic films – previously described by reference to Creed – in light of Guida's declaration in an interview with Manlio Gomasca and Davide Pulici (1999): “sure, I get undressed, but I have almost never appeared naked in scenes portraying sexual intercourse. People see me naked through keyholes, taking a shower in the bathroom”. Even from these few details, one can get the sense of Guida's erotic or sexy comedies, in contrast to the “hard core” tones of pornographic films, where “scenarios of sex” are rendered through an emphasis on “genitalia and their interactions” (Creed 1994c: 318).

Commedia sexy's light approach to sexuality characterises *L'infermiera di notte*, Guida's twenty-first production. The film starts with dentist Nicola Pischella (Banfi), a *Casanova* caricature, hiring Angela (Guida) to work as a night nurse. Her patient is Nicola's wife's supposed uncle, Saverio (Mario Carotenuto). The latter, actually, is called Alfredo, who is a thief in disguise, bent on stealing a diamond the real Saverio hid in the Pischellas' chandelier. While the Pischellas are unaware of owning the precious stone, Saverio told Alfredo about it before he died. Angela has meanwhile become the girlfriend of Nicola's son, Carlo (Leo Colonna), an attractive and socially responsible student doctor – fitting in with the classic paradigm of screen nurses being involved in romance. Eventually, neither Alfredo nor the Pischellas find the diamond, but Angela does, sharing the news with Carlo.

For all the intricacies of its plot, the film's true emphasis is on the

unsuccessful attempts of its male characters – all Latin lover caricatures, apart from Carlo – to seduce the beautiful Angela. In this lies the essence of *L'infermiera di notte*'s humour: Angela is not a comic character *per se* – unlike, for example, Windsor's nurses – and the laughter she generates derives from the contrast between her serious behaviour and the gags her bizarre wooers' inept schemes create. Concurrently, the love story between Angela and Carlo is an important component of the plot. The key point is that, contrary to what happens in *Carry On Matron* and *Doctor*, in *L'infermiera di notte* romance is not parodied. My aim in this section is examining Angela's peculiar characterisation, where her power derives from a unique combination of sex appeal, innocence and moral rectitude.

Most of these features are apparent from Angela's first appearance in the film, with its opening credits. These start with a close-up of her crossed legs (figure 4.34), visualised from an open door – a perspective recalling Laura Mulvey's (1975) argument on the “voyeuristic-scopophilic look”. In this respect, despite Angela's demure clothing – a turtleneck sweater, a long skirt and a pair of boots – part of her lower body is displayed. The camera precisely focuses on that, which suggests Angela's association with erotic male desire.



Figure 4.34



Figure 4.35

The sultriness arising from this opening image is then attenuated as the camera tilts to Angela's upper profile. Her demeanour and “baby face” give her an aura of elegance and innocence. Moreover, she reads *L'Espresso*, Italy's main politically independent news magazine, which bestows on her a certain intellectual air (figure 4.35) – and, to some extent, subverts Angela's possible association with the dumb blonde stereotype. With her extreme good looks, Angela cannot pass unnoticed by dentist Nicola Pischella – to whose surgery she has accompanied her aunt, as a “good girl”. Indeed, Nicola immediately shows his appreciation, by fawning over her in an impulsive and often vulgar manner (figure 4.36).

As mentioned above, the mockery of Italy's institutions is a distinctive feature of *commedia sexy*: Nicola clearly aims at parodying the medical profession. An even more caustic example is offered in *L'infermiera nella corsia dei militari* – set in a psychiatric hospital run by caricatural Doctor Amedeo La Russa. Though romance is present also in this film, the romantic story line is not as relevant as in *L'infermiera di notte*: comedy, at times slapstick, is the prevailing feature. Laughter relies on gags involving patients presented as grotesque – mainly men, suffering from diverse forms of mental illnesses, and all in love with Cassini's nurse Grazia – and their interaction with the farcical Amedeo.

Of the four sexy comedies about nurses I discuss, *L'infermiera nella corsia dei militari*'s comic scenario arguably is the closest to the medical *Carry On* films. Like medical *Carry On* comedies, the film is mainly set in a hospital – a location that is either absent or of minor importance in the other Italian films

discussed here. The psychiatric hospital allows for more extreme and absurd situations to emerge, mainly involving the mentally ill patients, their relationship with the farcical hospital staff, and their unfortunate courtship of Grazia. In the other three sexy comedies, most scenes are set in the family's house – a villa in *L'infermiera*, a castle in *L'infermiera di mio padre*, and a more ordinary flat in *L'infermiera di notte* – which points to the family institution as the main target of derision. This is especially evident in *L'infermiera*, as I shall discuss shortly.



Figure 4.36



Figure 4.37

Another typical feature of *commedia sexy* is the use of Italy's regional dialects – especially audible in *L'infermiera di notte* and in *L'infermiera* – that generate puns detectable by Italian-speaking audiences. This linguistic feature further emphasises some characters' grotesque nature – in a way that recalls the use of cockney as a means of derision in Gerald Thomas's comic characters. With regard to *L'infermiera di notte*, this especially affects the Latin lover caricature – i.e. Nicola – and some women presented as either “old” or “vulgarly sexy” – i.e. a religious nurse and Nicola's secret lover Zaira, respectively. Although she is Roman, Angela speaks instead with a standard Italian accent. This trait is a further clue to her refinement and middle-class identity, and makes her unique in relation

to the other women the film features.

Some of the latter – namely, Zaira (Paola Senatore), and the Pischellas' neighbour Annamaria (Annamaria Clementi) – are themselves beautiful women. However, unlike Angela, they are shown as uninhibited and intentionally provocative, sexually excessive (Zaira) and even nymphomaniac (Annamaria). Zaira's and Annamaria's naked bodies can be construed as compensating for Angela's, who only ever appears unveiled twice, and for a very short time (Lupi 2005: 84). That said, Zaira and Annamaria's more audacious embodiment of sexuality is not a means to their control over men because it is presented as too extreme: significantly, as a result, they are “punished” and none of them is able to attain her love goal. Zaira eventually gives herself up to Peppino (Alvaro Vitali), Nicola's awkward and grotesque assistant. Similarly, despite her never ending attempts to seduce Carlo – and cheat on her husband – Annamaria fails in her plan, too, Carlo being in love with Angela. Thus, Zaira and Annamaria function as “the woman as the joke's passive butt” described by Freud, on which Rowe (1995: 68-9) draws for her account of women as sexual objects of laughter.

A similarly objectified female type is maid Tosca Floria Zanin (Carla Romanelli) in *L'infermiera*. Tosca is beautiful but more naïve than Zaira and Annamaria – though, like them, sexually uninhibited. She willingly sleeps with the film's farcical men, and often appears naked. In *L'infermiera*, the choice of a nurse and a maid as the film's erotic characters is not accidental. In terms of class, both women are hired to be in the service of rich Leonida (and his mainly male “court”). From a gender angle, they play the same subservient role: satisfying male pleasure. In *L'infermiera*, thus, these women highlight their place in

patriarchal and class hierarchies, which partly explains how Michele Giordano (2000) can see in the film “an attempt at criticising the Venetian bourgeoisie of the time” (p. 89).

Women like Zaira, Annamaria and Tosca, in whom eroticism is enhanced to excess, are present in all the sexy comedies I consider. *L'infermiera nella corsia dei militari* features Amedeo's frigid/nymphomaniac wife Veronica (Nieves Navarro). A less attractive but still sexually excessive woman is the Prince of Leuca's wife (Bianca Toccafondi) in *L'infermiera di mio padre*. The opposite female type, grotesque and sexually inhibited, or non-sexual, is also recurrent. Besides the religious nurse, *L'infermiera di notte* features Nicola's wife Lucia (Francesca Romana Coluzzi), while *L'infermiera nella corsia dei militari*, Sister Fulgenzia (Ermelinda De Felice). The sexy nurse always stands out from this ensemble of women: while not grotesque, her sex appeal is used as a means to exercise control over men. This enables her to succeed in her goals, thereby giving her a degree of agency, and allowing her not to become a mere metaphor for objectification. Concurrently, the other women's excessive nature enables the films to conceal the patriarchal representation of the central woman/nurse, who still functions, in a less explicit way, as a fetishized sexual fantasy and object of the gaze, albeit with more agency and in more modern guise.

Turning back to *L'infermiera di notte*, Angela's romance with Carlo plays a significant role in her characterisation: it further corroborates her identification as an icon of sensual youth, and also highlights her moral position as a nurse. In this regard, it is significant that Angela and Carlo's encounter does not occur at the Pischellas', but in an office at the university. Consequently, when they start dating,

neither of them is aware of the other's connection with the family. For some reason, Angela never mentions her job to Carlo: whenever he invites her out at night, she simply says she must leave early – hence, her nickname “Cinderella” – which is, yet, also a clue to her reliability as a professional. Indeed, only once does Angela let romance prevail over duty, won over by Carlo's repeated requests. Carlo understands that Angela is the nurse about whom his father talks excitedly simply because, by chance, he eventually meets her in his flat. Encouraged by the fortuitous coincidence, and eager to spend a whole night out with her, he then makes his father's assistant Peppino disguise himself as a nurse, and cover for Angela.



Figure 4.38



Figure 4.39

This episode aside, Angela's moral rectitude and skill as a nurse emerges more than once in the film, thereby becoming a dominant feature of the narrative. For example, Angela cannot wait to start working when introduced to her patient “Saverio”, also demonstrating that she is familiar with his therapy (figure 4.37). Furthermore, notwithstanding their hierarchical relationship, she challenges her boss Nicola's medical advice. Angela's professional integrity is also reflected in her regular dismissal of Saverio's and Nicola's advances. The seriousness she

shows with the two men also marks her approach to Carlo. However, with Saverio and Nicola, she is emotionally detached – as can be seen in a scene with Nicola (figure 4.38), whom she walks with arm in arm, her body rigid, and her eyes looking elsewhere. With Carlo, instead, tenderness and chaste love effusions replace detachment (figure 4.39) – in all but one scene.

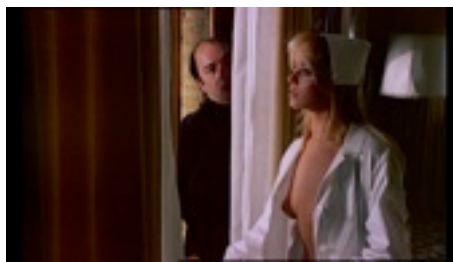


Figure 4.40

Angela is only twice the protagonist of an explicitly sexual spectacle. The two scenes in question (figures 40 and 41), as well as those illustrated by figures 38 and 39, represent the two generic landscapes underlying *L'infermiera di notte*: slapstick comedy targeting farcical characters (Nicola, Peppino, “fake” Saverio, etc.) and the romance between Angela and Carlo, respectively. From the juxtaposition of these two parallel worlds, between which Angela’s sexuality is pivotal, arises an important part of the film's distinctive humour.

Turning back to the scenes portraying Angela's sexual spectacle, in the first case she is ostensibly unaware of this. The scene starts with Nicola deliberately hiding a heater in the bedroom where Angela assists Saverio. Eventually overwhelmed by the unbearable heat, Angela unbuttons her uniform, and reaches the window behind which Nicola is hidden, in order to enjoy some fresh air

(figure 4.40). She stands in the frame's foreground, a position enabling the spectator to enjoy her partly naked profile, as her unbuttoned uniform reveals one of her breasts. She looks outside the window with an exhausted but also sensual expression, apparently without realising that, in the background, Nicola is voyeuristically staring at her in ecstasy.

Here, Angela is evidently depicted as the male gaze's sexual object. Comedy, however, attenuates the scene's erotic charge since, as we saw, Angela's undressing occurs because of Nicola's childish comic trick. While satisfying Nicola's and Saverio's visual pleasure, this joke however makes the two also struggle because of the intolerable heat. Close-ups of Nicola's and Saverio's pained expressions further enhance the laughter this absurd situation generates.

In this scene – as almost everywhere in the film – men are evidently ridiculed, a feature Cook (1976) includes in her account of women's treatment in exploitation cinema. In this respect, also the fact that Nicola overtly manipulates Angela, leading her to behave in accordance with male erotic fantasies of women (reflected in her way of undressing, moving, sighing, etc.) fits Cook's argument. More generally, in their representation of women, Italian sexy comedies offer – like American exploitation film – an “overt manipulation of stereotypes and genre conventions”, which allows the spectator to appreciate that “language is at work” – unlike mainstream and art cinema, where forms are often dangerously naturalised (pp. 124-5).

I am aware that employing Cook's argument here means applying the work of a British scholar on American exploitation cinema to a different kind of film in a different national cinema. Nevertheless, the validity of Cook's approach is

relevant to *L'infermiera di notte* and, in general, to my approach to the film beyond the point highlighted above. In the scene under discussion, for example, Angela's uniform functions as a fetish, which Cook sees as another typical element of women's representation in exploitation film (p. 123).

Significantly, this scene is one of the few where Angela appears in her white coat – here worn for a relatively short time, and then partly removed, as unbuttoned. Noticeably, too, in both the scenes displaying Angela's naked body, she initially wears the costume. Angela's occasional use of the uniform distinguishes her from the other nurses of *commedia sexy*, Andress's Anna in particular. The latter wears several uniforms: all light-coloured, below the knee, but with an extreme décolleté that makes her breasts particularly visible. Especially in Anna's case, the uniform's “play” resides in its juxtaposition of contrasting values: austerity, neatness and sexual provocativeness. Predictably, Anna wears one of her uniforms (combined with white underwear and tights, which recall the traditional costume's colour) also in the scene of her striptease for adolescent Adone.

The uniform's fetishistic value is thus of importance in Italian sexy comedies, as it is also more generally in erotic representations. Valerie Steele (1996) has explored the relationship between fetishism, clothing and sexual fantasies, arguing: “the costume is [...] part of an elaborate erotic drama. Participants in these ritualized sexual encounters [...] wear costumes drawn from a limited range of dress-up roles, among the most common being [...] the nurse” (p. 183). In Steele's opinion, though not truly identifiable as an authoritative figure, the nurse “has a certain power that gives her an erotic charisma”. Indeed,

“she is [...] supposed to help the patient ‘get better’ [...] Moreover, the patient is in a dependent and passive position vis-a-vis the nurse”. This, in “sodomasochistic and fetish pornography” is translated “directly [...] into therapeutic intercourse” (p. 182).



Figure 4.41

Turning back to *L'infermiera di notte*, a similar use of the uniform marks also the second explicitly erotic scene featuring Angela. Here, unlike in the earlier scene, she is aware of her sexual spectacle. Taking advantage of their being alone in the bedroom, Angela and Carlo start kissing passionately: they end up in bed, with Angela – initially wearing her uniform – eventually naked (figure 4.41). The focus on this more explicit depiction of their romance does not last for long, but the few images the public is given to see are more explicit than in the previous case.

Here, Angela arguably exemplifies the positive heroine Cook discusses (1976). She is tantalising, uninhibited and passionate. Moreover, unlike in the scene of her first undressing, she is not manipulated by a male character, but fully aware of her actions. In this sense, she can be identified as the subject of desire,

and not just as an object “seen totally in terms of male phantasies and obsessions” (p. 126). This said, and despite Angela’s conscious and proactive sexual behaviour, this more “hard core” scene’s depiction of sexuality arguably remains patriarchal in two ways: the ostentatious display of Angela’s naked body, and the fact that Carlo not only dominates Angela, but also remains fully clothed.

Drawing back to Cook (1976), this scene can be yet also seen as another example of the “overt manipulation of stereotypes” distinguishing women’s representation in the exploitation genre. As before, the scene’s apparently “all but feminist” approach to Angela’s depiction allows instead the spectator to take a critical distance from the filmic forms employed, with the ultimate effect of rendering the stereotypes the scene deploys more obvious and, thus, more amenable to a feminist interpretation. To some extent, this principle is applicable to the whole of *L'infermiera di notte*: its narrative – with special regard to Angela and Carlo’s romance – arguably conforms to traditional generic canons. In this respect, it is not accidental that romance of the two lovers – who, significantly, are both young and beautiful and, not least, identifiable as “good” characters – is crowned by a happy ending: these elements clearly reinforce their stereotypical embodiment of the “perfect couple”.

In light of Cook’s (1976) account, the stereotypical narrative and representational style described above have the effect of “parodying those styles and the accompanying stereotypes”. Hence, Cook suggests, these features eventually are a means to expressing women’s oppression too, although through a “non-coherent” feminist metalanguage (p. 127). A similar approach is displayed in one of *L'infermiera nella corsia dei militari*’s last scenes, too. The scene

illustrates the “revelation” of the mutual attraction between Grazia and Doctor Santarelli (Paolo Giusti) – the film's charming and serious doctor, in contrast to Amedeo. Stereotypes dominate: a beautiful nurse realises her dream of union with a handsome doctor. However, Grazia and Santarelli’s expression of love is more physical than romantic, and includes a slapstick element: as they kiss passionately on a hospital bed, fully clothed, Santarelli falls off the bed and on to the floor. While toning down eroticism, these comic features render the scene's approach to sexuality closer to the *Carry On* films’, for instance recalling the passionate kissing in bed between Susan and Cyril (figure 4.19) in *Carry On Matron* – although Grazia, unlike the *Carry On* sex-kitten nurses, complies with conventional canons of beauty.

The parallel with *Carry On* films is further confirmed by the fact that, whenever Grazia's naked body is shown, she is involved in comic situations, with farcical male characters hopelessly intent on making advances towards her. Thus, nudity is displayed only in the absence of sexuality, and vice versa – as in the medical *Carry On* films’ case. This, however, does not prevent Grazia from being the object of male manipulation, as in the scene of the injection, which I referred to previously.

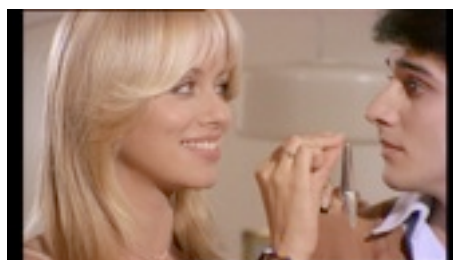


Figure 4.42

Turning back to *L'infermiera di notte*, the film ends with Nicola, Alfredo/Saverio and other minor characters getting into a car to find the legendary diamond. The chandelier holding the precious stone has meanwhile been removed from the Pischellas' sitting room, and is about to be scrapped. Nobody knows Angela has the diamond, not even Carlo, who is surprised when she shows it to him (figure 4.42). However, sharing the news with Carlo and, as the film suggests, seeing in the precious stone a way to secure their future together, exempts Angela from blame. In fact, the film closes with Angela holding the diamond, next to Carlo. While the farcical characters have been dispatched, this happy ending aligns the film with romantic comedy.

As my analysis has aimed to demonstrate, the sexy nurse's representation in *commedia sexy* is not as degrading as some Italian critics have maintained for decades, referring to the overall depiction of women in the sub-genre. Angela and other sexy nurses within this film group, for example Grazia in *L'infermiera nella corsia dei militari*, offer evidence of this. Less "angelic" than blonde Angela, the dark-haired Grazia (a nightclub entertainer disguised as a nurse) is constructed as a more overtly sensual figure. Yet, while her stunning looks turn her into a sexual fantasy for all the male characters in the film – both patients and doctors – her generally candid behaviour contextually evokes a sense of innocence.

The latter trait is actually the cause of Grazia's involvement in the criminal sub-plot, which consists of her stealing a painting from the hospital. Yet, as soon as she realises that she has been set up, she does not hesitate to dispense justice, literally capturing the instigator. As we saw, like Angela, Grazia's righteous

conduct is eventually “rewarded” with handsome Doctor Santarelli’s love. Though the latter has never openly expressed his feelings for Grazia, in fact treating her very harshly, his interest in her is discernible from their first meeting, through his enthusiastic acknowledgement of her (natural) nursing skills and rare intellectual curiosity.

As *L'infermiera nella corsia dei militari* also shows, hybridity lies at the heart of the nurse’s characterisation in *commedia sexy*. While sexual appeal and enigmatic allure are core ingredients of these nurses’ profiles, innocence and uprightness are, to a greater or lesser degree, also present. Guida’s Angela represents the most balanced example of such combined features. Cassini’s Grazia offers a similar, though more complicated, type, since it involves deception and disguise.

Despite both Angela and Grazia being somehow involved in criminal activities, they are far removed from the *femme fatale* figure. Eventually, both are considered innocent, “rewarded” with romantic love, and their characterisation – helped by the actresses’ attractive youthful looks and candid behaviour – arguably is far from degrading. Slightly different cases are *L'infermiera*’s Anna and *L'infermiera di mio padre*’s Daniela. Both successfully use their bodies as a weapon, and yet somehow remain guiltless. Anna seduces a rich old man, “kills” him (through her body’s spectacle) and inherits his fortune. However, in doing so, she only succeeds in completing the task corrupt Benito had hired her to do, outwitting him in the process. Daniela, by contrast, nurses her patient without taking advantage of his evident interest in her, and leaving him as soon as he recovers. All four nurses in the sexy comedies analysed here – Angela, Grazia,

Anna and Daniela – despite wielding their sexuality as a weapon, include no element of scheming or mystery. Unlike film noir, where the dangerous *femme fatale* traps the sympathetic male hero with her sexuality, in *commedia sexy*, the nurses are the sympathetic figures, and their “victims” are almost exclusively pathetic, conniving or farcical men.

The sexy nurses’ analysis I have offered in this section challenges prevailing critical views, which identify these characters as mere carnal objects, or as characters exclusively “aimed at satisfying voyeurism, sexual appetite and freedom” (Mereghetti 2006: 1301). I do not underestimate the important role the explicit representation of the nurse’s body and/or sexuality plays in these portrayals. On the contrary, especially in the case of pornographic films, or productions that are more erotic than comic, such elements predominate. However, as my chapter has demonstrated, comedy features a range of nurse types, which include but are not confined to objects of sexual desire.

Further evidence of this also comes from very recent comedies featuring nurses, for example Garry Marshall's *New Year's Eve* (US, 2011). In line with the trends that, from the late 1990s, mark the nurse’s representation in most cinematic genres, nurse Aimee’s (Halle Berry) depiction in the film is not uniformly derogatory. On the one hand, Aimee is a dedicated nurse, who spends her New Year's Eve at the hospital, lovingly assisting late stage cancer patient Stan Harris (Robert De Niro). On the other, she is also a beautiful young woman, who longs to see, if only for a short time, her husband, a soldier serving in Afghanistan.

Aimee's portrayal differs from those of other comic nurses examined in this chapter, for instance Windsor's Susan and Sandra, and Guida's Angela, in part

because her characterisation is based on a series of arguably more conservative values, which to some extent fits Diane Negra's (2009) discussion of the representation of "postfeminist" women. While Aimee's relationship with her husband is kept alive through the Internet, a sign of her 21st century identity, her overriding concern for her family corresponds to this female type as discussed by Negra. However, Aimee's dedicated attitude to nursing marks her identity and narrative trajectory more than the elements above. Unlike many of the postfeminist women Negra theorises, in Aimee the "work/life balance dilemma" (p. 3) is ignored because her husband is away, and thus she is biased towards her work, which dominates her life. Nevertheless, Aimee's professional identity is deeply steeped in the traditional maternal and caring sides of nursing.

Another noteworthy point concerns race. As discussed throughout the thesis, screen nurses are predominantly white. In this light, it is remarkable that Aimee is embodied by Halle Berry, an actress of part African-American descent with light brown skin: this trait actually makes her stand out as unique amongst all the nurses embodied by stars that I have examined so far – including those featured in recent productions. However, Berry's light-black skin tone, which characterises many "black" (especially female) celebrities, shows the continued hegemony of whiteness (*See Dyer 1997*).

Aimee also shows that hybridity is a constant element in the comedy's characterisation of nurses – whether "romantic", "comedian" or "sexy". This is what prevents such characters from complying with the unconditionally derogatory stereotypes often associated with them. When not wholly upright, these nurses' portrayals display qualities that detract from negative stereotyping.

Crucially, the traits marking these characters' special nature and, thus, distinguishing them from mainstream comic female types, precisely derive from their identity as nurses. Once again, then, nursing is what actually determines these fictional women's "added value". This is of particular interest in the comedy's case, whose nurses tend to be the remembered in popular imagery exclusively as vulgar icons of sex. My reading aims to be a starting point to a more nuanced understanding of their fictional image.

CONCLUSION

This thesis examined the representation of female nurses in (North) American, British, and Italian feature films, through a focus on the biopic, melodrama, the thriller and comedy – the most prolific genres in terms of the depiction of nurses. The overarching aim of the study was to interrogate how the professional identity of nurses inflects traditional representations of (working) women within the genres considered, and if different national contexts are in turn influential in producing such representational variations. The thesis thereby explored the narrative roles of nurses as film protagonists; the prevalence of their professional, emotional or sexual side in their characterisation; the ideological ends to which these characters were put across the decades in different genres and different countries. To this end, textual analysis was the investigation's main vehicle, with feminist film theory, studies of genre and national cinema, and cultural histories of the image of nursing informing and supporting the different arguments. The discussion also considered questions of race, class and affect.

Based on the evidence generated by reference to numerous productions, from silent to contemporary cinema, the sixteen case study films discussed in the four chapters of the thesis – chapters one and two in Part One, and chapters three and four in Part Two – highlighted a general downward trajectory of “esteem” in terms of the representation of cinematic nurses. In this respect, my study overall aligned itself with the views of other scholars on the subject, including Beatrice and Philip Kalisch and Julia Hallam. “A return” to more affirmative depictions of these professionals was also observed from the late 1990s. At the extremes of the aforementioned downward trajectory was, on one hand, the pedestal where

Florence Nightingale and Edith Cavell were placed in the biopics and, on the other, the derogatory portrayals of nurses offered in the exploitation films. The nurses featured in more contemporary productions, such as *The English Patient* (UK, 1996), *Pearl Harbour* (US, 2001), *The Grudge* (US, 2004) and *New Year's Eve* (US, 2011), reflected, instead, the more “classic” template of the image of the nurse as a (professionally) reassuring guardian angel.

However, the examination of this downward trajectory of screen nurses shows that film genres and national backgrounds provide significant variations to “the rule”. For example, Italy has not produced any (celebrative) biopics of nurses, unlike America and Britain. The fact that the genre has never been particularly prolific in Italy has certainly played a role to this end; but another significant factor is the country’s relative lack of well-publicised role models – unlike in Britain (Nightingale and Cavell) – in its history of nursing.

My focus on Italian screen representations of nurses – in itself a neglected area of scholarly research – has also highlighted a general low regard of the nursing profession in Italy, whose conservatism was remarked upon by some of the pioneering British and American nurses who worked there. The influence of Catholicism on Italian society has made religion a pervasive theme in the country’s productions. The 1950s Italian melodramas about nurses (*Anna* and *Noi peccatori*), in particular, played a redemptive role for religion unlike the more peripheral role played by nursing, which was reflected in the protagonists’ characterisation and narrative trajectory. By contrast, a radically different approach, with nursing providing a redemptive force as opposed to the “bad” influence of religion, characterised the American melodrama *The Nun’s Story*

(1959) – reflecting in turn the status of the profession in the US. Britain has never produced films specifically focused on religious nursing, unlike Italy and America but, on the other hand, British cinema offered a sharp critique of religious women in the melodrama *Black Narcissus* (1947).

Such narrative differences helped foreground the presence of generic and national variations in the general cinematic nurse's downward trajectory trend. Complexities emerged from my analysis also in relation to concepts such as authority and agency, both key aspects to the nurse's identity as a *female* professional. This was acknowledged to be the prevailing gender of nurses in film, a point that intertwined with questions of race, class, and culture. This point provided revealing results in an analysis of the representation of working women and, by extension, of women in cinema. For example, the role model of Florence Nightingale and Edith Cavell as (British) nurses, embodied by Anna Neagle, epitomises a distinctive British, white and middle-class, "respectable" femininity. The study underlined the western idea of respectability, but also identified in the race/class-inflected image of the nurse a historical fact. Likewise, it was observed that the multiculturalism of the (real life) nursing workforce at present is significantly underrepresented in film, but also that white actresses still tend to be cast in leading parts when playing nurses.

My analysis also uncovered a significant complexity in the representation of nurses in film, beyond the more consensual historical role models of Nightingale and Cavell in their respective biopics. Indeed a degree of agency and authority characterises more apparently controversial screen nurses. One is Anna in the eponymous 1951 Italian melodrama. On the one hand, one could

well consider Anna a typical patriarchal product since, at the end of the film, she represses her (sexual) desire as a woman by becoming a religious nurse, and expiates her “sins” through the welfare of others and her dedication to God. On the other hand, Anna’s decision to make religious nursing her career and renounce her love life sees her opting for something she considers more personally fulfilling – religious nursing – and which enables her to remain independent as opposed to being part of a heterosexual couple. Without exaggerating her agency in doing so (having underlined the power of the Catholic Church in 1950s Italy), the fact remains that, by doing so, she demonstrates a degree of independence and autonomy.

Similar complexity, though in reverse, features in the four protagonists of *The Student Nurses* (US, 1970). If, in *Anna*, the heroine’s ostensibly reactionary trajectory from a feminist point of view can be read more “positively”, here a film that at first sight clearly relies on the codes and conventions of the soft-core exploitation genre reveals the possibility of more progressive readings. As we saw, the four female protagonists embody overt stereotypical types (the blond bombshell, the hippy, etc.); their trajectories comply with the conventional episodic narrative of the “group” sub-genre; and their figures are sexually exploited, through the graphic display of their naked bodies and, in some cases, sexual intercourse. Not only, to follow Pam Cook, can we argue that this blatant use of stereotypes allows the audience to identify and deconstruct the film text better, but the nurses do show agency and authority which enables the film to promote an enlightened agenda, for instance regarding women’s right to abortion.

In the case of *The Student Nurses* above, in some of the Italian sexy comedies, but also in other genres such as melodrama and the thriller, the complexity of the nurse figure is that visual coding (often the ultra-sexualisation of the woman) can be at odds with the narrative, which can allow for a social message or, as in melodramas and thrillers, some degree of professional competency. In the thesis, I described this aspect through the concept of “hybridity”, arguing that the nurse’s professional identity modifies the classic image of the female type she embodies in particular film genres. Film noir offered telling examples in this respect. *Calling Doctor Death* features nurse *fatale* Stella, who is both angelic and a killer. Likewise, *The Sleeping City* depicts nurse Ann as a thief whose crime is however motivated by the desire to save the life of her sister’s sick child. Gina Lollobrigida’s nurse Maria in *Woman of Straw* is unjustly accused of murdering her invalid husband/patient and finally recognised as “good” although, until the film’s end, her *fatale* aspect conceals her innocence, and thus she is characterised as “bad” throughout the film.

The case of Lollobrigida’s Maria draws attention to a further element related to the “hybridity” of filmic nurses, namely the influence of the actress’s star persona on the nurse character she plays. This was shown in the controversial identity of Silvana Mangano’s highly sensual religious nurse in *Anna*; in how Barbara Stanwyck’s tough female beauty enhances the androgyny of her “nurse-detective” in *Night Nurse*; and, again, through “baby face” Gloria Guida’s sexy but youthful and fresh nurse in *L’infermiera di notte*.

Throughout the thesis, my analysis has also enabled me to observe that nurses have often been played by A-list stars, from Joan Blondell to Kay

Francis, Paulette Goddard, Veronica Lake, Margaret Sullivan and, more recently, Juliette Binoche, Kate Beckinsale and Keira Knightley. The appeal these actresses hold for female spectators in particular was clearly supportive of recruitment, especially at the time in which the star/nurse phenomenon reached its peak: the 1940s and 1950s. Furthermore, the fact that major stars have embodied nurses throughout the decades confirms the character's ability to be seen as an important figure in the culture at large and, in turn, of enabling female stardom – something worth mentioning given the hegemony of male stars, especially in the Hollywood system (McDonald 2013: 26-8)

Considering further the question of agency and authority in the representation of nurses as professionals, another aspect emerged as significant: the tension between romance and career. My thesis charted the conflict between nurses' portrayals as working women – who undertake training, demonstrate skills, and are capable of managing emotions – and the encroachment of romance (and, later, sex) on their professional career and identity. A remarkable fact is that while cinematic nurses are invariably female, patients are virtually always male. The former is not so strange as male nurses actually are still a minority; however, the exclusive gendering of patients patently contradicts reality. But the main question at stake is: why does romance feature so prominently in most films on nurses?

The first reason relates to the nature of fiction film. With the exception of the biopic, the genres I examined almost universally deploy the convention of creating a (heterosexual) couple through a romantic plot and through the choice of actors. This is paradigmatic of Hollywood (Wexman 1993), but equally true

of other national cinemas. The second explanation is ideological, as the idea of the single, independent, powerful female is one with which our culture is still uneasy and which, therefore, has to be somehow suppressed. Romance is functional to this end, suggesting that the woman is “incomplete” with only concern for her profession. This explains also why, besides their patients, cinematic nurses often fall in love with male doctors, as this configuration ultimately reinforces hierarchies doubly, in terms of gender and power – with the nurse, invariably, in a subservient role. In a further twist to this pattern, I observed that nurses are not infrequently involved in relationships with wealthy male patients, for whom – or for whose relatives – they often work as private nurses, a situation that reiterates the gender/power relations mentioned above. This was seen in classic film noir such as *Possessed* (US, 1947), featuring Joan Crawford’s private nurse Louise as the new wife of her ex-patient’s wealthy husband, and *Woman of Straw* (UK, 1964) starring Lollobrigida; and in the sexy comedy *L’infermiera* (IT, 1975), in which Ursula Andress’s private nurse Anna eventually marries her rich invalid patient.

Earlier I remarked on the fact that, in films from the late 1990s onwards, the image of a number of nurses reflected, albeit in an updated format, the classic era template of the nurse as a professionally authoritative and reassuring “angel”. Contrasting with the downward trend that has affected the depiction of cinematic nurses for decades, this recent counter-trend suggested a renewed, more affirmative consideration of nurses – something virtually absent from films made between the late 1950s and the late 1990s as we saw, for example, with the particularly misogynist representations of nurses in *One Flew Over the Cuckoo’s*

Nest and *M*A*S*H**. Apart from melodramas such as the *English Patient* (UK, 1996) and *Pearl Harbour* (US, 2001), this favourable image of the nurse was observed in unlikely genres such as the (horror) thriller and romantic comedy, in characters such as Karen in *The Grudge* (US, 2004) and Aimee in *New Year's Eve* (US, 2011), respectively. Aimee was also identified as the only “non-white but respectable” nurse playing a major role in my filmography. Her character, thus, not only helped take the professional category up to date in terms of its multiculturalism, but also – and unusually – projected an affirmative image of the nurse onto a non-white character. Unsurprisingly, perhaps, Italy did not take part in this recent upward trend, which confirms the country’s lower regard of the profession in comparison to America and Britain.

The above further benefits from being considered in the light of recent healthcare reform in the US. In 2011, the Institute of Medicine and the Robert Wood Johnson Foundation released “The Future of Nursing”, a report aimed at discussing the challenge of meeting the expanding demand for healthcare in the US as established in “The Patient Protection and Affordable Care Act” (colloquially known as “Obamacare”), signed into law in 2010. So far, “Obamacare” has offered encouraging signs with respect to American nursing’s “progress”: the value of Registered Nurses is indeed being acknowledged through successful campaigns to upgrade the profession. Conversely, in Europe (the UK included), austerity measures have led to cuts in numbers of RNs, and to hiring more less qualified workforce, a trend which continues with the proposal to establish a second tier position in the form of the new “associate nurse” (see Aiken et al 2012 and 2014). A further, interesting inflection in the

global shifts in healthcare concerns Italy: “over 2500 nurses” have recently left the country to move to the UK, since there they “can make a career and being considered as persons, not numbers” (Liuni, 2015) – this confirming, once again, the relatively backward position of Italian nursing in relation to Britain (and America).

These developments further explain and document the recent upward representational trend discussed above, which some successful TV series featuring nurses as main characters also confirm. A telling example is the complex protagonist of the American TV series *Nurse Jackie* (2009-2015), a paradigmatic post-feminist heroine who, nonetheless, is very good at doing her job and who, despite her “defective” private life, does project a strong sense of professionalism. As we saw in the thesis, the nurse’s professionalism would, in previous times, have been undermined by her private behaviour. My analysis of 1970s comedies featuring “sexy nurses”, for example, highlighted that these characters’ identification as “sex-kitten caricatures” (Windsor’s Susan Ball in *Carry On Matron*) or “bombshells” (Andress’s Anna in *L’infermiera*), as well as their “dubious” conduct with male doctors and/or patients, challenged their professionalism – even when some professional expertise was hinted at in the film. By contrast, Nurse Jackie, whatever her private life, is clearly a capable professional – she is portrayed as such, and the audience cannot doubt it – and, against “clichéd” gender/power hierarchies, she ultimately appears as the “true leader” in the ward.

Yet, a backlash against female nurses is observable in other iconic medical television dramas such as *Grey’s Anatomy* (US, 2005-2015) and *Casualty* (UK,

1986-2015). In the first, nurses usually play peripheral roles, and are subject to hierarchical/gender bias, being subservient to the medical hierarchy and, frequently, having liaisons with (male) physicians. Together with its sexist approach to nurses, *Grey's Anatomy* centres on doctors who, as protagonists, tend to be “worshipped” for their “super-human” healing virtues – usually, at the expense of nurses. A different case is *Casualty* (UK, 1986-2015), where nurses are occasionally featured in major roles but, in this case, mostly as male characters – which suggests that sexual discrimination, albeit of a different type, characterises this series, too. A slightly less sexist approach to nursing is found in *ER* (US, 1994-2009), which features some strong (female) nurses who are able to demonstrate their skill and expertise as both practitioners in their own right and team players. However, these nurses’ position invariably remains subordinate to that of the physicians.

These latest examples highlight that screen representations of nurses are not yet entirely immune from sexist and/or hierarchical inflections, which contributes to keep alive a distorted image of these women’s professional value. In order to contrast this “misrepresentation”, and despite the fact that the sociology of professions seems to have gone slightly “out-of-fashion”, I believe developing further in-depth (feminist) analysis on screen depictions of professionalism in nursing is a worthwhile endeavour. Studies of this type would be beneficial to the development of new, nurse-related research areas within the Medical Humanities – a call to which my thesis has hopefully been able to contribute, by unearthing historical, sociological, and cultural aspects of the nursing profession and of their screen representations that, so far, have been

either neglected or left unexplored.

What film makes possible is the visualisation rather than verbalisation of the nurse's role and, as indicated earlier, my thesis suggests a more subtle reading of the nurse's figure is warranted through the generic approach I advocate – specifically, by highlighting how the nurse complicates generic patterns through her hybridisation of traditional female roles, and she inflects them with evolving forms of agency and power through her ambiguous status as a character. All this – subtle thought apparent to the eye – is less evident on the page. Therefore, complicating the nurse's role and reducing the extent to which her identity is “flattened” in literary formats makes her a character whose complexity has been hitherto largely hidden. Indeed, besides what is on view and shown to the audience, film also enables us to unveil less explicit aspects of a character – and, in my study, textual analysis was a key tool to this end.

I thereby believe my thesis has made a contribution to the Medical Humanities insofar as it has unearthed the contradictions and complexities in the polysemy of the nurse's portrayal in different filmic genres, by examining how the nurse as a character complicates those genres through the deployment of her expertise. Film, therefore, not only offers fertile ground to explore and explain how nurses are simultaneously the subjects and agents of broader gendered patterns of power relations; it also makes such relations more vivid and apparent – not just in a “reflectionist” but also in a “reflexive” manner.

In conclusion, while the representation of nurses in feature films has clearly been subjected to a chronologically long downward trend (until recently, where there is, possibly, the hint of an about turn), which has cut across different

countries and film genres (though with some variations), a final pronouncement on these professional women's cinematic image cannot be formulated in black and white terms – especially given my discussion above of complexity and hybridity. Nurses appear to have featured in every genre – however, as leading characters, they have appeared principally in those I have examined in detail – and they have covered the entire spectrum of female stereotypes, albeit in a hybrid way, as a result of their professional identity. They have predominantly reflected a white and middle-class image, which mostly has mirrored the values of the culture from which modern nursing emerged, and which to some extent are still predominant. Certainly, the historical role model of Nightingale and Cavell in the biopics has been gradually replaced by increasingly derogatory images of nurses, culminating in internationally famous, derided characters such as Nurse “Hot Lips” Houlihan in *M*A*S*H** or demonized protagonists like Nurse Ratched in *One Flew Over the Cuckoo's Nest*. However, exceptions to the rule were observed, even in unlikely characters such as the protagonists of *Anna* and *The Student Nurses*. The latter could demonstrate, although not straightforwardly, a certain degree of agency, which rendered them, potentially, feminist models. Finally, more recent representations of nurses show a modest revival of the affirmative portrayals of earlier eras.

I opened this study by stating that feminist film theory was the main theoretical basis of my enquiry into the representation of cinematic nurses. And I concluded the introduction by saying that I aimed to “do justice” to nurses with filmic evidence, by reaching a more nuanced reading of their representation – which had often been cast in derogatory terms. So, how has feminist film theory

helped me achieve these goals? One way was through understanding how film language and generic patterns are themselves embedded in patriarchal culture – and, accordingly, how this affects the depiction of nurses. Studies of the representation of women in film genres, including Barbara Creed’s (1993), Christine Gledhill’s (1994), Kathleen Rowe’s (1995) and E. Ann Kaplan’s (1998) have been key reference points to this end. One of the telling examples in my thesis was the depiction of biographical Nightingale and Cavell, where asexual and self-abiding traits were advocated as “laudable” – a viewpoint clearly reflecting the conservative ethos of the first half of the 20th century on women.

Another important aspect feminist film studies helped me uncover was the complexity of gender stereotypes. Challenging the set of defined stereotypical images of women theorised by early feminist film critics such as Molly Haskell, cinematic nurses were also revealingly expanded and enriched thanks to the views of more contemporary feminist film scholars. The case of “thrilleresque nurses” was especially illustrative. For example, Jane in *Kiss the Blood off My Hands* offered an alternative reading of the film noir’s “nurturing woman” as described by Janey Place (1998): the fact of “having a record” led to Jane’s identification with the idea of “quasi-nurturance”. Likewise, Susan in *Valley of the Zombies* reconfigured the “women as possessed monster” type theorised by Creed (1993), being beautiful outwardly and, not least, surviving the evil – unlike the “classic” icon.

Feminist cultural studies and feminist theories of affect – including those of Pam Smith (1992) and Julia Hallam (1998, 2000) – also provided illuminating insights. A key point in this respect concerned the complex negotiation that

nurses have to handle between their management of emotions as professionals, the demands of the profession in terms of skills, and patriarchal imperatives. My textual analysis illustrated that Susan in *The Feminine Touch*, an arguably “model patriarchal product”, could nonetheless show an attempt to cope with the skills and the management of emotions required by the profession. A higher degree of autonomy, though still operating within patriarchal gender views, was given to “tough” Lora in *Night Nurse*, whose “hybrid” profile as a nurse-detective was also enhanced by professional authority. The model nurse Nightingale, unsurprisingly, could combine expertise with stoic emotional labour, while at the same time demonstrating commitment to subverting patriarchal gender bias.

This latter point leads to the scholarly contribution that historians, such as Anne Marie Rafferty, also gave to my analysis, casting light on how the social history of real life nurses can be inserted within the history of women and, accordingly, helping me foreground key historical facts that could inform and substantiate my arguments.

Thus, in this study, feminist film theory has been complemented by the reference to other areas of feminist scholarship, including cultural studies and nursing history. This theoretical framework has illuminated my analysis of screen representations of nurses in a way that, hopefully, answers my call for a more nuanced set of readings. At the same time, this framework has demonstrated both the vitality of feminist approaches to the cinema, and the validity of this project concerning the representation of a particularly important category of female workers.

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APPENDIX

Film Corpus: Chronological/Genre Order.

Title	Country	Year	Director	Genre
<i>Nurse and Martyr</i>	UK	1915	Percy Morgan	Biopic
<i>Florence Nightingale</i>	UK	1915	Maurice Elvy	Biopic
<i>The Woman the German Shot</i>	US	1918	John G. Adolphi	Biopic
<i>Dawn</i>	UK	1928	Herbert Wilcox	Biopic
<i>I Was a Spy</i>	UK	1933	Victor Saville	Biopic
<i>The White Angel</i>	US	1936	William Dieterle	Biopic
<i>Nurse Edith Cavell</i>	US	1939	Herbert Wilcox	Biopic
<i>Sister Kenny</i>	US	1946	Dudley Nichols	Biopic
<i>The Lady with a Lamp</i>	UK	1952	Herbert Wilcox	Biopic
<i>No Greater Love</i>	US	1952	Harald Braun	Biopic
<i>The Miracle Worker</i>	US	1962	Arthur Penn	Biopic
<i>Love and War</i>	US	1899	T. A. Edison Inc.	Melodrama
<i>Rescued by Rover</i>	UK	1906	Lewin Fitzhamon	Melodrama
<i>Red Cross Pluck</i>	UK	1914	Ethyle Batley	Melodrama
<i>The Black Butterfly</i>	US	1916	Burton L. King	Melodrama
<i>The Splendid Sinner</i>	US	1918	Edwin Carewe	Melodrama
<i>When a Woman Sins</i>	US	1918	Gordon Edwards	Melodrama
<i>Heart of Humanity</i>	US	1918	Allen Holubar	Melodrama
<i>Palaver</i>	UK	1926	Geoffrey Barkas	Melodrama
<i>Tell It to the Marines</i>	US	1926	George W. Hill	Melodrama
<i>A Farewell to Arms</i>	US	1932	Frank Borzage	Melodrama
<i>Men Must Fight</i>	US	1933	Edgar Selwyn	Melodrama
<i>Lord Camber's Ladies</i>	UK	1933	Benn W. Levy	Melodrama
<i>The White Parade</i>	US	1934	Irving Cummings	Melodrama
<i>Once to Every Woman</i>	US	1934	Lambert Hillyer	Melodrama
<i>Registered Nurse</i>	US	1934	Robert Florey	Melodrama
<i>The Last Outpost</i>	US	1935	Charles Barton	Melodrama
<i>Moscow Nights</i>	UK	1935	Anthony Asquith	Melodrama
<i>Private Worlds</i>	US	1935	Gregory La Cava	Melodrama
<i>The Road to Glory</i>	US	1936	Howard Hawks	Melodrama
<i>Between Two Women</i>	US	1937	George B. Seitz	Melodrama
<i>The Man Who Found Himself</i>	US	1937	Lew Landers	Melodrama
<i>King of Alcatraz</i>	US	1938	Robert Florey	Melodrama
<i>The Storm</i>	US	1938	Harold Young	Melodrama
<i>Bank Holiday</i>	UK	1938	Carol Reed	Melodrama
<i>The Nurse from Brooklyn</i>	US	1938	S. Sylvan Simon	Melodrama
<i>Pacific Liner</i>	US	1939	Lew Landers	Melodrama
<i>Doctor Christian</i>	US	1939		Melodrama
<i>Four Girls in White</i>	US	1939	S. Sylvan Simon	Melodrama
<i>Vigil in the Night</i>	US	1940	George Stevens	Melodrama
<i>Women in War</i>	US	1940	John H. Auer	Melodrama
<i>The Siege of the Alcazar</i>	IT	1940	Augusto Genina	Melodrama

Title	Country	Year	Director	Genre
<i>Shining Victory</i>	US	1941	Irving Rapper	Melodrama
<i>The White Ship</i>	IT	1942	Roberto Rossellini	Melodrama
<i>Flying Tigers</i>	US	1942	David Miller	Melodrama
<i>Parachute Nurse</i>	US	1942	Charles Barton	Melodrama
<i>So Proudly We Hail</i>	US	1943	Mark Sandrich	Melodrama
<i>Cry Havoc</i>	US	1943	Richard Thorpe	Melodrama
<i>To the Shores of Tripoli</i>	US	1943	H. Brice Humberstone	Melodrama
<i>The Lamp Still Burns</i>	UK	1943	Maurice Elvey	Melodrama
<i>The White Cliffs of Dover</i>	US	1944	Clarence Brown	Melodrama
<i>Up in Arms</i>	US	1944	Elliott Nugent	Melodrama
<i>Paisa' - Episode IV</i>	IT	1946	Roberto Rossellini	Melodrama
<i>Blaze of Noon</i>	US	1947	John Farrow	Melodrama
<i>Seven Were Saved</i>	US	1947	William H. Pine	Melodrama
<i>Homecoming</i>	US	1948	Mervyn LeRoy	Melodrama
<i>The Snake Pit</i>	US	1948	Anatole Litvak	Melodrama
<i>Pinky</i>	US	1949	Elia Kazan	Melodrama
<i>Jolson Sings Again</i>	US	1949	Henry Levin	Melodrama
<i>Anna</i>	IT	1951	Alberto Lattuada	Melodrama
<i>Life in Her Hands</i>	UK	1951	Philip Leacock	Melodrama
<i>The Blue Veil</i>	US	1951	Curtis Bernhardt	Melodrama
<i>White Corridors</i>	UK	1951	Pam Jackson	Melodrama
<i>With a Song in My Heart</i>	US	1952	Walter Lang	Melodrama
<i>Saturday Island</i>	UK	1952	Stuart Heisler	Melodrama
<i>Torpedo Alley</i>	US	1952	Lew Landers	Melodrama
<i>Battle Circus</i>	US	1953	Richard Brooks	Melodrama
<i>Noi peccatori</i>	IT	1953	Guido Brignone	Melodrama
<i>White Witch Doctor</i>	US	1953	Henry Hathaway	Melodrama
<i>Magnificent Obsession</i>	US	1954	Douglas Sirk	Melodrama
<i>The Left Hand of God</i>	US	1955	Edward Dmytryk	Melodrama
<i>Not as a Stranger</i>	US	1955	Stanley Kramer	Melodrama
<i>The Feminine Touch</i>	UK	1956	Pat Jackson	Melodrama
<i>No Time for Tears</i>	UK	1957	Cyril Frankel	Melodrama
<i>Hellcats of the Navy</i>	US	1957	Nathan Juran	Melodrama
<i>Seven Waves Away</i>	US	1957	Richard Sale	Melodrama
<i>A Farewell to Arms</i>	US	1957	Charles Vidor	Melodrama
<i>In Love and War</i>	US	1958	Philip Dunne	Melodrama
<i>Ice Cold in Alex</i>	UK	1958	J. Lee Thompson	Melodrama
<i>South Pacific</i>	US	1958	Joshua Logan	Melodrama
<i>The Nun's Story</i>	US	1959	Fred Zinnemann	Melodrama
<i>The Bramble Brush</i>	US	1960	Daniel Petrie	Melodrama
<i>Exodus</i>	US	1960	Otto Preminger	Melodrama
<i>The Sins of Rachel Cade</i>	US	1961	Gordon Douglas	Melodrama
<i>The Interns</i>	US	1962	David Swift	Melodrama
<i>Adventures of a Young Man</i>	US	1962	Martin Ritt	Melodrama
<i>The Caretakers</i>	US	1963	Hall Bartlett	Melodrama
<i>Doctor Zhivago</i>	US	1963	David Lean	Melodrama
<i>It Happened Here</i>	UK	1965	Kevin Brownlow	Melodrama

Title	Country	Year	Director	Genre
<i>The Longest Hundred Miles</i>	US	1967	Don Weis	Melodrama
<i>Women of Desire</i>	US	1968	Vincent L. Sinclair	Melodrama
<i>1943: Un Incontro</i>	IT	1969	Alfredo Giannetti	Melodrama
<i>Johnny Got His Gun</i>	US	1971	Dalton Trumbo	Melodrama
<i>One Flew Over the Cuckoos' Nest</i>	US	1975	Milos Forman	Melodrama
<i>Hanover Street</i>	UK	1979	Peter Hyams	Melodrama
<i>La disubbidienza</i>	IT	1981	Aldo Lado	Melodrama
<i>Whose Life is It Anyway?</i>	US	1981	John Badham	Melodrama
<i>Dying Young</i>	US	1991	Joel Schumacher	Melodrama
<i>The English Patient</i>	US	1996	Anthony Minghella	Melodrama
<i>In Love and War</i>	US	1996	Richard Attenborough	Melodrama
<i>Magnolia</i>	US	1999	Paul Thomas Anderson	Melodrama
<i>La balia</i>	IT	1999	Marco Bellocchio	Melodrama
<i>Pearl Harbour</i>	US	2001	Michael Bay	Melodrama
<i>Atonement</i>	UK	2007	Joe Wright	Melodrama
<i>The Blue Tower</i>	UK	2008	Smit Bhide	Melodrama
<i>Blue Valentine</i>	US	2010	Derek Cianfrance	Melodrama
<i>New Year's Eve</i>	US	2011	Garry Marshall	Melodrama
<i>Night Nurse</i>	US	1931	William A. Wellman	Thriller/Mystery
<i>Miss Pinkerton</i>	US	1932	Lloyd Bacon	Thriller/Mystery
<i>The Mayor of Hell</i>	US	1933	Archie Mayo	Thriller/Mystery
<i>Urgent Call</i>	US	1934	Lambert Hillyer	Thriller/Mystery
<i>While the Patient Slept</i>	US	1935	Ray Enright	Thriller/Mystery
<i>Murder by an Aristocrats</i>	US	1936	Frank McDonald	Thriller/Mystery
<i>The Murder of Dr Harrigan</i>	US	1936	Frank McDonald	Thriller/Mystery
<i>A Fight to the Finish</i>	US	1937	Charles C. Coleman	Thriller/Mystery
<i>They Gave Him a Gun</i>	US	1937	S. Van Dyke	Thriller/Mystery
<i>Slim</i>	US	1937	Ray Enright	Thriller/Mystery
<i>The Great Hospital Mystery</i>	US	1937	James Tinling	Thriller/Mystery
<i>Mystery House</i>	US	1938	Noel M. Smith	Thriller/Mystery
<i>The Patient in Room 18</i>	US	1938	Bobby Connolly	Thriller/Mystery
<i>Secrets of a Nurse</i>	US	1938	Arthur Lubin	Thriller/Mystery
<i>Girl in the News</i>	UK	1940	Carol Reed	Thriller/Mystery
<i>The Nurse's Secret</i>	US	1941	Noel M. Smith	Thriller/Mystery
<i>Calling Dr Death</i>	US	1943	Reginald Le Borg	Thriller/Mystery
<i>Escape in the Fog</i>	US	1945	Budd Boetticher	Thriller/Mystery
<i>Green For Danger</i>	UK	1946	Sidney Gilliat	Thriller/Mystery
<i>Shock</i>	US	1946	Alfred L. Werker	Thriller/Mystery
<i>Possessed</i>	US	1947	Curtis Bernhart	Thriller/Mystery
<i>Kiss the Blood off My Hands</i>	US	1948	Norman Foster	Thriller/Mystery
<i>The Great Jewel Robber</i>	US	1950	Peter Godfrey	Thriller/Mystery
<i>Backfire</i>	US	1950	Vincent Sherman	Thriller/Mystery
<i>Outside the Wall</i>	US	1950	Crane Wilbur	Thriller/Mystery
<i>The Sleeping City</i>	US	1950	George Sherman	Thriller/Mystery
<i>Bonaventure</i>	US	1951	Douglas Sirk	Thriller/Mystery
<i>Rear Window</i>	US	1954	Alfred Hitchcock	Thriller/Mystery

Title	Country	Year	Director	Genre
<i>Bad for Each Other</i>	US	1955	Irving Rapper	Thriller/Mystery
<i>Woman of the Straw</i>	UK	1964	Basel Dearden	Thriller/Mystery
<i>The Honeymoon Killers</i>	US	1969	Leonard Kastle	Thriller/Mystery
<i>Paper Mask</i>	UK	1990	Christopher Morahan	Thriller/Mystery
<i>The Nurse</i>	US	1997	Robert Malenfant	Thriller/Mystery
<i>Nurse Betty</i>	US	2000	Neil LaBute	Thriller/Mystery
<i>Gun Shy</i>	US	2000	Eric Blakeney	Thriller/Mystery
<i>Body of Lies</i>	US	2008	Ridley Scott	Thriller/Mystery
<i>Game of Death</i>	US	2010	Giorgio Serafini	Thriller/Mystery
<i>Spooks Run Wild</i>	US	1941	Phil Rosen	Horror Thriller
<i>I Walked with a Zombie</i>	US	1943	Jacques Tourneur	Horror Thriller
<i>Valley of the Zombies</i>	US	1946	Philip Ford	Horror Thriller
<i>The Vampire</i>	US	1957	Paul Landres	Horror Thriller
<i>I tre volti della paura</i>	IT	1963	Mario Bava	Horror Thriller
<i>Nightmare</i>	UK	1964	Freddie Francis	Horror Thriller
<i>The Strangler</i>	US	1964	Burt Topper	Horror Thriller
<i>Night of Bloody Horror</i>	US	1969	Joy N. Houck Jr.	Horror Thriller
<i>Scream and Scream Again</i>	UK	1970	Gordon Hessler	Horror Thriller
<i>House of Terror</i>	US	1973	Sergei Goncharoff	Horror Thriller
<i>Nurse Sherri</i>	US	1978	Al Adamson	Horror Thriller
<i>Suor omicidi</i>	IT	1979	Giulio Berruti	Horror Thriller
<i>Delusion</i>	US	1980	Alan Beattie	Horror Thriller
<i>An American Werewolf in London</i>	UK	1981	John Landis	Horror Thriller
<i>This House is Possessed</i>	US	1981	William Wiard	Horror Thriller
<i>Death Nurse</i>	US	1987	Nick Millard	Horror Thriller
<i>Not of this Earth</i>	US	1988	Jim Wynorski	Horror Thriller
<i>The Dead Pit</i>	US	1989	Brett Leonard	Horror Thriller
<i>Bless the Child</i>	US	2000	Chuck Russell	Horror Thriller
<i>The Grudge</i>	US	2004	Takashi Shimizu	Horror Thriller
<i>Dawn of the Dead</i>	US	2004	Zack Snyder	Horror Thriller
<i>The Skeleton Key</i>	US	2005	Iain Softley	Horror Thriller
<i>The Living and the Dead</i>	UK	2006	Simon Rumley	Horror Thriller
<i>The Ward</i>	US	2010	John Carpenter	Horror Thriller
<i>The Tramp and the Baby's Bottle</i>	UK	1899	Bamforth Company	Comedy
<i>Baby's Toilet</i>	UK	1905		Comedy
<i>Wanted: A Nurse</i>	US	1906		Comedy
<i>Fricot Soldato</i>	IT	1912		Comedy
<i>A Hospital Hoax</i>	US	1912		Comedy
<i>Billy's Nurse</i>	US	1912		Comedy
<i>An Interrupted Honeymoon</i>	UK	1913	Bert Haldane	Comedy
<i>Good Morning Nurse</i>	US	1917	Allen Curtis	Comedy
<i>Kick the Germ out of Germany</i>	US	1918	Alfred J. Goulding	Comedy
<i>Through the Back Door</i>	US	1921		Comedy
<i>The Glorious Fool</i>	US	1922	E. Mason Hopper	Comedy
<i>Why Worry?</i>	US	1923	Fred C. Newmeyer	Comedy
<i>Leap Year</i>	US	1924	James Cruze	Comedy
<i>Whoopee!</i>	US	1930	Thornton Freeland	Comedy
<i>Men in White</i>	US	1934	Richard Boleslawski	Comedy

Title	Country	Year	Director	Genre
<i>Nobody's Baby</i>	US	1937	Gus Meins	Comedy
<i>Wife, Doctor and Nurse</i>	US	1937	Walter Lang	Comedy
<i>Tall, Dark and Handsome</i>	US	1941	H. Bruce Humberstone	Comedy
<i>General Nuisance</i>	US	1941	Jules White	Comedy
<i>Flight from Folly</i>	UK	1945	Herbert Mason	Comedy
<i>Who Killed Doc Robbin</i>	US	1948	Bernard Carr	Comedy
<i>Miranda</i>	UK	1948	Ken Annakin	Comedy
<i>Harvey</i>	US	1950	Henry Koster	Comedy
<i>Half Angel</i>	US	1951	Richard Sale	Comedy
<i>You for Me</i>	US	1952	Don Weis	Comedy
<i>Doctor in the House</i>	UK	1954	Ralph Thomas	Comedy
<i>Operation Mad Ball</i>	US	1957	Richard Quine	Comedy
<i>Doctor at Large</i>	UK	1957	Ralph Thomas	Comedy
<i>Carry On Nurse</i>	UK	1959	Gerald Thomas	Comedy
<i>Operation Petticoat</i>	US	1959	Blake Edwards	Comedy
<i>Doctor in Love</i>	UK	1960	Ralph Thomas	Comedy
<i>Twice Round the Daffodils</i>	UK	1962	Gerald Thomas	Comedy
<i>Tammy and the Doctor</i>	US	1963	Harry Keller	Comedy
<i>Nurse on Wheels</i>	UK	1963	Gerald Thomas	Comedy
<i>Captain Newman, M.D.</i>	US	1963	David Miller	Comedy
<i>The Courtship of Eddie's Father</i>	US	1963	Vincente Minnelli	Comedy
<i>The Disorderly Orderly</i>	US	1964	Frank Tashlin	Comedy
<i>Veneri al sole</i>	IT	1965	Marino Girolami	Comedy
<i>Not with My Wife, You Don't!</i>	US	1966	Norman Panama	Comedy
<i>Doctor in Clover</i>	UK	1966	Ralph Thomas	Comedy
<i>Carry On Doctor</i>	UK	1968	Gerald Thomas	Comedy
<i>Yours, Mine and Ours</i>	US	1968	Melville Shavelson	Comedy
<i>Cactus Flower</i>	US	1969	Gene Sacks	Comedy
<i>Carry On Again, Doctor</i>	UK	1969	Gerald Thomas	Comedy
<i>Loot</i>	UK	1970	Silvio Narizzano	Comedy
<i>MASH</i>	US	1970	Robert Altman	Comedy
<i>Catch 22</i>	US	1970	Mike Nichols	Comedy
<i>Carry On Matron</i>	UK	1972	Gerald Thomas	Comedy
<i>Where Does it Hurt?</i>	US	1972	Rod Amateau	Comedy
<i>The National Health Service or Nurse Norton's Affair</i>	UK	1973	Peter Nichols	Comedy
<i>The Crazy World of Julius Vrooder</i>	US	1974	Arthur Hiller	Comedy
<i>High Anxiety</i>	US	1977	Mel Brooks	Comedy
<i>The World According to Garp</i>	US	1982	George Roy Hill	Comedy
<i>Young Doctors in Love</i>	US	1982	Garry Marshall	Comedy
<i>The Wacky Adventures of Dr. Boris and Nurse Shirley</i>	US	1995	Paul Leder	Comedy
<i>True Love</i>	UK	1996	Simon Massey	Comedy
<i>Next Stop Wonderland</i>	US	1998	Brad Anderson	Comedy
<i>How to Get Laid at the End of the World</i>	US	1999	Lori Fontanes	Comedy
<i>Lucignolo</i>	IT	1999	Massimo Ceccherini	Comedy

Title	Country	Year	Director	Genre
<i>Something's Gotta Give</i>	US	2001	Nancy Meyers	Comedy
<i>High Heels and Low Lives</i>	UK	2001	Mel Smith	Comedy
<i>Hope Springs</i>	UK	2002	Mark Herman	Comedy
<i>29 and Holding</i>	US	2004	Sean Hanish	Comedy
<i>Lonesome Jim</i>	US	2005	Steve Buscemi	Comedy
<i>Blind Dating</i>	US	2006	James Keach	Comedy
<i>RoboDoc</i>	US	2009	Stephen Maddocks	Comedy
<i>No Strings Attached</i>	US	2011	Ivan Reitman	Comedy
<i>Cooler</i>	US	2011	Ernesto Foronda	Comedy
<i>Cherry, Harry, and Raquel</i>	US	1972	Russ Meyer	Sexy Comedy
<i>Meatball</i>	US	1973	Gerard Damiano	Sexy Comedy
<i>L'infermiera</i>	IT	1975	Nello Rossati	Sexy Comedy
<i>L'infermiera di mio padre</i>	IT	1975	Mario Bianchi	Sexy Comedy
<i>What's Up Nurse!</i>	UK	1977	Derek Ford	Sexy Comedy
<i>L'infermiera di campagna</i>	IT	1978	Mario Bianchi	Sexy Comedy
<i>Rosie Dixon, Night Nurse</i>	UK	1978	Justin Cartwright	Sexy Comedy
<i>L'infermiera di notte</i>	IT	1979	Mariano Laurenti	Sexy Comedy
<i>L'infermiera nella corsia dei militari</i>	IT	1979	Mariano Laurenti	Sexy Comedy
<i>W la foca</i>	IT	1982	Nando Cicero	Sexy Comedy
<i>Young Nurses in Love</i>	US	1989	Chuck Vincent	Sexy Comedy
<i>The Student Nurses</i>	US	1970	Stephanie Rothman	Erotic Drama
<i>Private Duty Nurses</i>	US	1971	George Armitage	Erotic Drama
<i>Night Call Nurses</i>	US	1972	Jonathan Kaplan	Erotic Drama
<i>Il diavolo nella carne</i>	IT	1991	Joe D'Amato	Erotic Drama
<i>L'uomo che guarda</i>	IT	1994	Tinto Brass	Erotic Drama
<i>The Young Nurses</i>	US	1973	Clint Kimbrough	Erotic Thriller
<i>Candy Stripe Nurses</i>	US	1974	Alan Holleb	Erotic Comedy/Thr
<i>Deep Throat</i>	US	1972	Gerard Damiano	Comedy Porn
<i>Deep Throat II</i>	US	1974	Joseph W. Sarno	Comedy Porn
<i>Oh Those Nurses!</i>	US	1982	C. C. Williams	Porn
<i>Nasty Nurses</i>	US	1984	Paul Vatelili	Porn
<i>Too Hot to Touch</i>	US	1987	Bob Vosse	Porn
<i>Candy Strippers</i>	US	2006	Kate Robbins	Erotic Horror/Sci-Fi